



# Bath Township Zoning

Summit County, Ohio  
3864 West Bath Road - P.O. Box 1188 - Bath, Ohio - 44210-1188  
Phone: 330.666.4007 - Fax: 330.666.0305  
www.bathtownship.org

## Residential Addition Application

For office use only:	Permit No.:	ARC File No.:	BZA File No.:
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### Applicant Data

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

### Property Data

Zoning District: (circle one) R-1 R-2 R-3 R-4 B-1 B-2 B-3 B-4 B-5

Corner Lot:  Yes  No Note: Corner lots are required to meet the front setback on both streets.

Property Address: \_\_\_\_\_

Allotment Name: \_\_\_\_\_ Lot No.: \_\_\_\_\_

Owner(s): \_\_\_\_\_

Owner Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

### Site/Structure Data

Setbacks (ft.): Front \_\_\_\_\_ Sides \_\_\_\_\_ & \_\_\_\_\_ Rear \_\_\_\_\_ Height (ft.): \_\_\_\_\_

Square Footage: Finished basement \_\_\_\_\_ 1<sup>st</sup> floor \_\_\_\_\_ 2<sup>nd</sup> floor \_\_\_\_\_ 3<sup>rd</sup> floor \_\_\_\_\_

Decks and porches \_\_\_\_\_ Garage \_\_\_\_\_ Total square feet \_\_\_\_\_

Is there an existing oil/gas well or tank battery within one hundred fifty feet (150') of this proposed structure?  Yes  No If yes, the distance (in feet) to proposed dwelling is: \_\_\_\_\_

Will the driveway road access be moved or will temporary (construction) road access be created?  Yes  No If yes, then, for township roads, a culvert permit is required from the Bath Service Dep't.

## Required Site Plan Data and Architectural/Construction Drawings

The following items must be submitted with the application in order to be reviewed. The application will be reviewed and the applicant will be contacted when the plans are approved. The Ohio Revised Code sets forth a maximum of thirty (30) days for review of all applications. No applications will be reviewed at the time of submittal. ***Incomplete applications will delay the review process.*** Site inspections will be conducted at the discretion of the Zoning Inspector.

1. Two (2) copies of the site plan. If the application is associated with a *conditional use or a variance*, eight (8) copies must be submitted. The site plan must show the following:
  - A North arrow and scale
  - Existing structures and dimensions
  - Driveway and road access locations (existing and/or proposed)
  - Proposed structure(s) and dimensions
  - All setbacks
  - Roads
  - Lot dimensions
  - Easements
  - Septic system and well location (if applicable)
  - Indicate the location of lakes, ponds, wetlands, ravines, or other unusual topography
  - Riparian Corridor(s) must be clearly indicated on all lots containing applicable watercourses
  - All slopes greater than 12% must be indicated on a two (2) foot contour interval map with the contours extending at least 100 feet beyond the lot lines
2. Two (2) copies of the building/construction plans showing major details including height data. If the application is associated with a *conditional use or a variance*, eight (8) copies must be submitted.
3. Septic system and well location with copies of sewage disposal system plan and approval from Summit County Health Department (330-923-4891) or Permit to Connect Sanitary Sewer from Summit County Department of Environmental Services (330-926-2400).
4. Digital copy of all required documents (i.e. .pdf file).

## Applicant Certification

By initialing, the applicant has read, understands, and agrees to the following:

- \_\_\_\_\_ 1. Right Of Revocation - It is understood and agreed by this applicant that any error, misstatement, misrepresentation of material fact, with or without intent, such as might and/or would case a refusal of this application, or any material alteration in the accompanying plans made subsequent to the issuance of a Zoning Certificate without approval of the Zoning Inspector or Zoning Board of Appeals, shall constitute sufficient grounds for the revocation of such certificate.
- \_\_\_\_\_ 2. The applicant agrees to allow the Zoning Inspector access to the property for on-site inspection(s).
- \_\_\_\_\_ 3. On County Roads you may be required to obtain a culvert permit from the Summit County Engineers' Office – (330) 643-2850.
- \_\_\_\_\_ 4. On Bath Township Roads a charge will be made for a Road Entry Permit if required. Additionally a culvert permit fee deposit may be required to assure that roadway culverts are installed in accordance with township regulations and requirements. Call the Bath Township Service Director at (330) 665-5066 to obtain the necessary applications and documents.
- \_\_\_\_\_ 5. The applicant agrees to abide by the Ohio Revised Code Sections §5589.08, §5589.10, and §5589.22 in that no dirt or mud is permitted on the road right-of-way during construction and that any repair costs for damage to the roadway or parts thereof will be paid by the applicant.

- \_\_\_\_\_ 6. There may be deed restrictions on the property that differ from the Bath Township Zoning Regulations. Please check your deed to make sure that any proposed project meets any restrictions that may be in effect.
  
- \_\_\_\_\_ 7. The applicant agrees to abide by the Ohio Fire Code, Article 3 (§1301:7-7-03), Section F-301.0, and the appropriate section of the Ohio Revised Code pertaining to open burning. No open burning is permitted without first obtaining appropriate permits from the Ohio Environmental Protection Agency, Akron Office **and** the Bath Township Fire Department. The applicant also agrees to abide by Sections §F-409.1 and §F409.2.2 of the Ohio Fire Code pertaining to portable fire extinguishers during construction operations.
  
- \_\_\_\_\_ 8. The zoning certificate shall become void at the expiration of one (1) year after date of issuance, unless the structure or alteration thereof is started, or within two (2) years after the date of issuance, unless the structure or alteration is completed.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fee (make check payable to Bath Township Trustees)

\$0.05 per square foot with a minimum of \$25.00

For Office Use Only

Appearance Review Commission      File No.: ARC - -

Board of Zoning Appeals              File No.: BZA - -

Approved                      Approved with Conditions\*                      Denied

\*If approved with conditions, attach copy of conditions to this application and Zoning Certificate.

Zoning Certificate                      File No.: ZP - -

Approved                      Denied\*\*

Zoning Inspector Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\* Reason for denial: \_\_\_\_\_  
 \_\_\_\_\_  
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