



# 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

## Swimming Pool Application

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

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

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

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

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

### Fence 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.

Site Address: \_\_\_\_\_ Parcel No.: \_\_\_\_\_

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

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

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

### Site Data

Note that the pool area includes that of the pool itself and any surrounding structures or permanent improvements such as a deck or patio. Pools are considered as additions when *attached* to the main building or as accessory structures when *detached* from the main building.

This pool is being constructed as (check one):  An addition  An accessory structure

Pool type:  In-ground  Above-ground Height of above-ground pool (ft): \_\_\_\_\_

Pool area including surrounding structures/improvements (sq. ft.): \_\_\_\_\_

Front Setback (ft.) \_\_\_\_\_ Side Setback (ft.) \_\_\_\_\_ & \_\_\_\_\_ Rear Setback (ft.) \_\_\_\_\_

If the pool is being constructed as an accessory structure, please complete items 1-3 below:

1. Setback from house (ft.): \_\_\_\_\_
2. Total area of *proposed* accessory structures (sq. ft.): \_\_\_\_\_
3. Total area *existing* accessory structures (sq. ft.): \_\_\_\_\_

If a fence is being constructed, please complete items 1-3 below:

1. Type of fence: \_\_\_\_\_
2. Height of fence (ft.): \_\_\_\_\_
3. Maximum gap in fence (in.): \_\_\_\_\_

If a fence is not required, please list the reason why below:

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**Required Site Plan Data and Detail 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. 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 and lot dimensions
  - Roads and easements (include details)
  - Septic system and well location (if applicable)
  - Indicate the location of lakes, ponds, wetlands, ravines, or other unusual topography
  - Riparian setback(s) must be clearly indicated on all lots containing applicable watercourses
  - Slopes greater than 12% require a two (2) foot contour interval overlay with the contours extending at least 100 feet beyond the lot lines to check compliance with Section 802
2. Two (2) copies of the fence and pool detail drawings showing major details including height data.
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. 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.
- \_\_\_\_\_ 4. 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.
- \_\_\_\_\_ 5. 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)

Residential: \$0.05 per square foot with a minimum of \$50.00 + \$25.00 for fence (if applicable)

Commercial: \$0.10 per square foot with a minimum of \$50.00 + \$25.00 for fence (if applicable)

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Zoning Certificate File No.: ZP - -  Approved  Denied\*

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

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