



APPLICATION FOR CONDITIONAL USE PERMIT
COMMUNITY PLANNING and ECONOMIC DEVELOPMENT
20 W. Federal St., Suite 602
Youngstown, OH 44503
330-742-8842

Date: _____

The undersigned applies for a zoning permit for the use herein described, such permit to be issued on the basis of the information contained within and attached to this application. The applicant hereby certifies that all information is true and correct.

TO BE COMPLETED BY APPLICANT:

Email _____

Name of Applicant

Mailing Address Daytime Phone

Name of Property Owner

Mailing Address Daytime Phone

Application is hereby made to (describe intended use): _____

City Lot/Outlot _____ Located at _____

Lot Width _____ Lot Depth _____ Lot Area _____

Applicant's Signature

TO BE COMPLETED BY HEALTH DEPARTMENT:

For wild animals, large or small livestock or poultry

Type and number of animals to be permitted _____

Conditions required to keep the animals _____

Sanitarian's Signature

TO BE COMPLETED BY PLANNING DEPARTMENT:

Existing Zoning _____

Proposed Development subject to Design Review: Yes _____ No _____

Proposed Development subject to Historic District Review: Yes _____ No _____

Proposed Development subject to Floodplain Review: Yes _____ No _____

Design Review/Historic Case Number: _____

Date of Planning Commission Hearing _____

Fee Paid _____

Receipt # _____

Planning Department Signature