

ACCESSORY STRUCTURE PERMIT APPLICATION

(Decks, Sheds, Garages, Pole Barns, etc.)
(Last Updated 07/09/2020)



INSTRUCTIONS

1. Please complete and mail completed application to City of Youngstown Zoning Department, Youngstown City Hall, 26 S. Phelps St. 5th Floor, Youngstown, OH 44503.
2. Include **\$25.00** application fee (via check, cash, or money order) made payable to the City of Youngstown.
3. You must include a site plan (see attached) of your proposed accessory structure to this permit application.

****YOUR APPLICATION WILL BE REJECTED IF YOU DO NOT INCLUDE PAYMENT AND DRAWING****

PROPERTY INFORMATION

Street Address			
Parcel ID Number			
Type of Project (Check One)	<input type="checkbox"/> Front Porch	<input type="checkbox"/> Attached Garage/Carport	<input type="checkbox"/> Shed
	<input type="checkbox"/> Back Porch	<input type="checkbox"/> Detached Garage/Carport	<input type="checkbox"/> Pole Barn

APPLICANT INFORMATION

Name	
Residential Address	
Phone Number	
Email Address	
Owner's Name and Phone (If Different)	

STRUCTURE INFORMATION

Dimensions of Proposed Structure	Length (ft)	Width (ft)	Height (ft)
Total Square Feet of Proposed Structure			
Are there other accessory structures (detached garages or sheds) on the property?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, what is the total square feet of the existing structure?			
If yes, is that structure being removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

SETBACK INFORMATION

Note: The "setback" is how far your proposed structure is from the neighboring property lines or street

Front (ft)	Rear (ft)	Side (ft)
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SIGNATURE

The undersigned hereby certifies that the information contained in this application is true and accurate; that he or she consents to agents of the City entering the premises for inspection and verification of information submitted; and, if a permit is issued, to verify conformance to requirements and conditions of issuance.

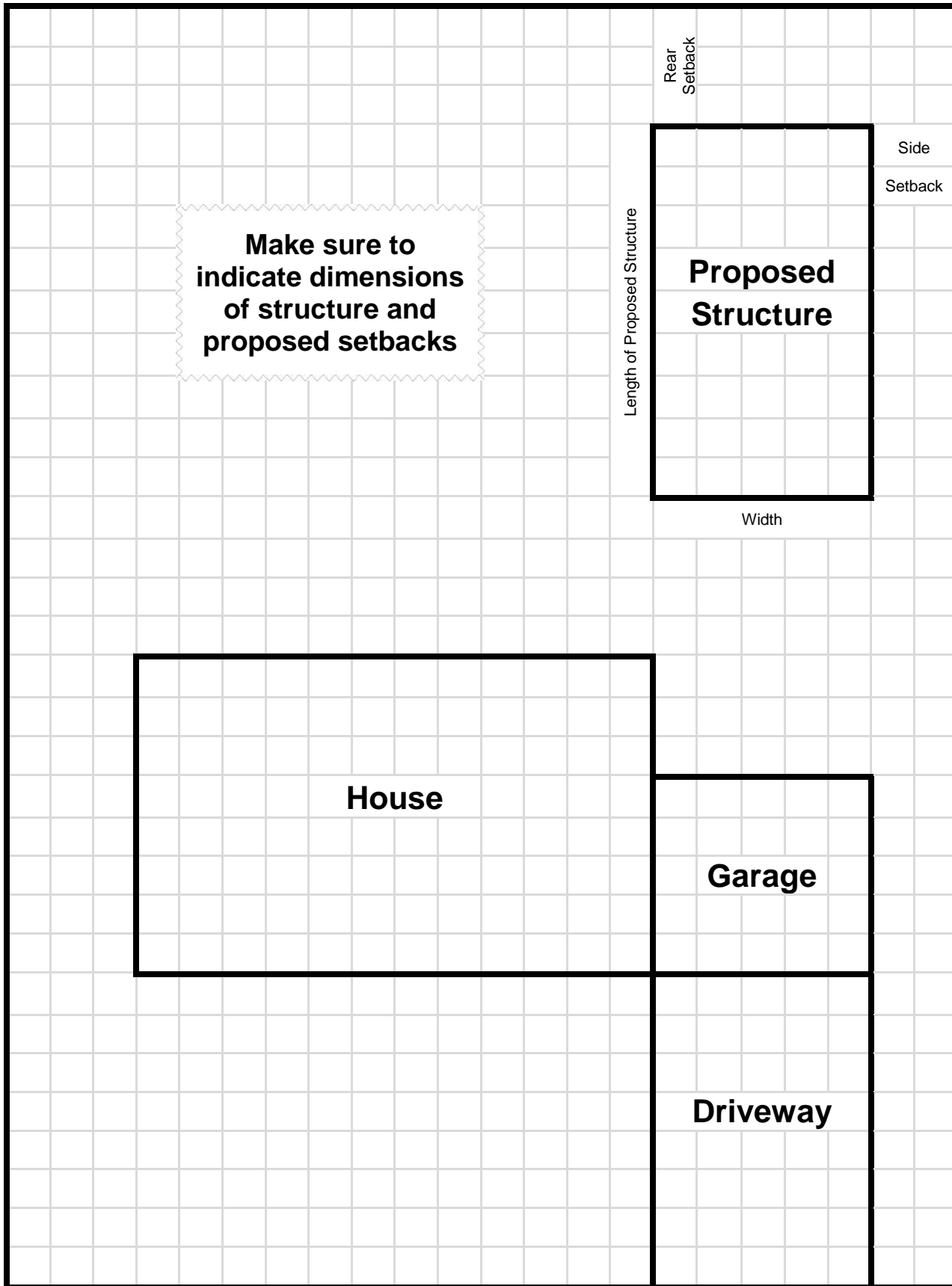
Signature of Applicant: _____

Date: _____

CITY OFFICE USE ONLY

Date Processed:	Sq. Foot Legal <input type="checkbox"/> Yes <input type="checkbox"/> No	Fee: \$25.00
Staff Initials:	Setback Legal <input type="checkbox"/> Yes <input type="checkbox"/> No	Fee Paid <input type="checkbox"/> Yes <input type="checkbox"/> No
DR/HDR/FPR: <input type="checkbox"/> Yes <input type="checkbox"/> No	Use Legal <input type="checkbox"/> Yes <input type="checkbox"/> No	Receipt #
Status of Permit: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Other	By: _____	
Reason for Denial (if Applicable): _____		

SITE PLAN TEMPLATE



APPLICANT'S SITE PLAN

