



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	
Brief Description of Project	

APPLICANT INFORMATION

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

SWIMMING POOL INFORMATION

Swimming Pool in Back Yard?	<input type="checkbox"/> Yes	<input type="checkbox"/> No – Reason:	
Dimensions of Proposed Swimming Pool	Length (ft)	Width (ft)	Height (ft)
Type of Project	<input type="checkbox"/> Above Ground Pool	<input type="checkbox"/> Below Ground Pool	<input type="checkbox"/> Hot Tub
If below ground:			
Will you have the required six foot enclosure fence and screening device around the entire pool? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Will access to the pool be through the residence or a self-closing AND childproof gate only? <input type="checkbox"/> Yes <input type="checkbox"/> No			

SETBACK INFORMATION

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

Left Side (ft)	Rear (ft)	Right Side (ft)
----------------	-----------	-----------------

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.

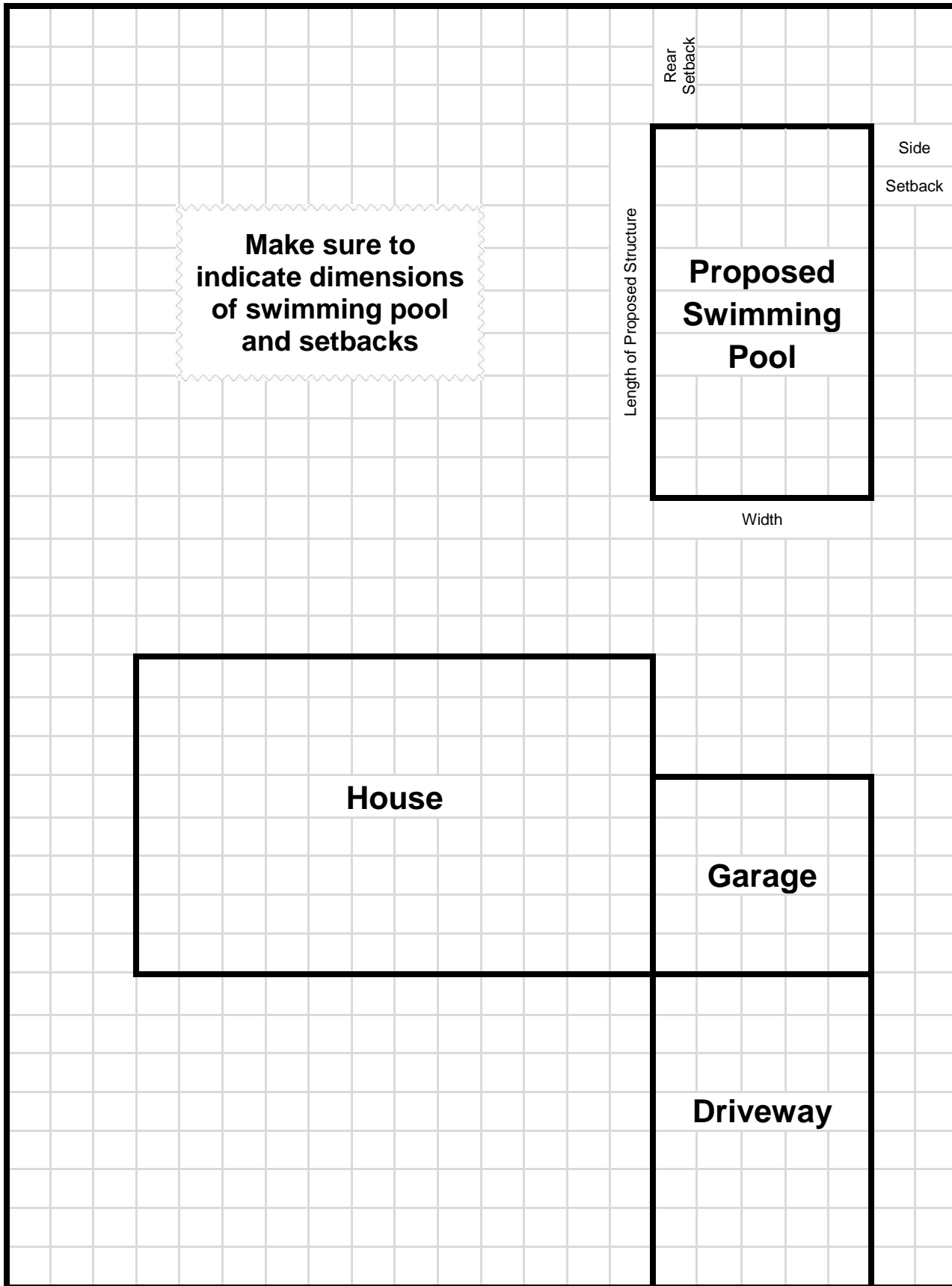
Signature of Applicant: _____

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	Safety 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

