

CERTIFICATE NUMBER:

FORM NO. 2
APPLICATION FOR CHESTER TOWNSHIP
ZONING CERTIFICATE
SIGN APPLICATION

THE UNDERSIGNED HEREBY APPLIES FOR A ZONING CERTIFICATE FOR THE FOLLOWING DESCRIBED USE, SAID CERTIFICATE TO BE ISSUED BY THE TOWNSHIP ZONING INSPECTOR ON THE BASIS OF THE INFORMATION CONTAINED WITHIN THIS APPLICATION.

NOTE: THIS APPLICATION IS TO BE USED FOR ONE SIGN ONLY. IF YOU ARE APPLYING FOR MULTIPLE SIGNS, THEN YOU MUST FILL OUT AN INDIVIDUAL APPLICATION FOR EACH SIGN.

THIS APPLICATION SHALL BE COMPLETED BY THE APPLICANT (PLEASE PRINT)

SECTION 1-GENERAL INFORMATION

For Official Use: ☐ Section One is Complete.

NAME OF APPLICANT: _____

ADDRESS: _____ SUITE NUMBER: _____

CITY: _____ STATE: _____

HOME TELEPHONE NO.: _____ BUSINESS TELEPHONE NO.: _____

EMAIL: _____

ADDRESS OF LOT (IF DIFFERENT FROM APPLICANT'S CURRENT ADDRESS): _____

NAME OF OWNER OF RECORD*: _____

ADDRESS: _____ SUITE NUMBER: _____

CITY: _____ STATE: _____

HOME TELEPHONE NO.: _____ BUSINESS TELEPHONE NO.: _____

***If the name of the applicant is different from that of the owner of record, then you must provide documentation as to authority (standing) to make application (e.g., deed, contract, power of attorney, lease, or purchase agreement), and the signature of the legal owner.**

LOT PRESENTLY ZONED: ☐ RESIDENTAL ☐ COMMERCIAL/ SHOPPING CENTER ☐ INDUSTRIAL

PRESENT USE OF LOT: _____ FOR HOW LONG: _____

PROVIDE A DESCRIPTION OF THE PROPOSED USE OF THE LOT:

- ☐ WALL SIGN
☐ GROUND SIGN
☐ SPECIAL EVENT SIGN

PLEASE ATTACH THE FOLLOWING AND CHECK WHEN THE APPROPRIATE BOX WHEN COMPLETE:

- ☐ 1. A legal description of the lot, as recorded with the Geauga County Recorder.
☐ 2. **IF THE PROPOSED USE IS COMMERCIAL OR INDUSTRIAL:** A commercial/industrial addendum needs to be completed (Form 1-A).

SECTION 2-SIGNS

For Official Use: ☐ Section Two is Complete.

ATTACH TWO (2) COPIES OF A DRAWING, DRAWN TO SCALE (WITH SCALE INDICATED) AND DATED, SHOWING THE FOLLOWING INFORMATION:

1. The dimensions (in feet) of the sign.
2. The area of the sign (per sign face in square feet). **See the definition of a sign face in the Zoning Resolution*
3. The location of the sign on the building, structure, or lot, including dimensions (in feet) from the lot line(s).
4. The height (in feet) of the sign.
5. The method of illumination, if any, to include a description of how any exterior light fixture for the sign will be shielded so as to prevent direct light being emitted beyond the boundaries of the sign as required by the Zoning Resolution.
6. The dimensions of the lettering and/or the elements of the matter displayed (e.g., a logo).

SECTION 3-PLANS AND MAPS

For Official Use: ☐ Section Three is Complete.

NOTE: THIS SECTION IS TO BE COMPLETED FOR GROUND SIGNS ONLY.

ATTACH TWO (2) COPIES OF A PLAN OR MAP, DRAWN TO SCALE (WITH SCALE INDICATED), WITH A NORTH ARROW AND DATE SHOWING THE FOLLOWING INFORMATION:

CHECKBOXES ARE FOR OFFICIAL USE ONLY:

- ☐ 1. The dimensions (in feet) of all lot lines and the total acreage of the lot.
- ☐ 2. The dimensions and elevations (in feet) of all existing buildings or structures on the lot, if any.
- ☐ 3. The setback (in feet) from all lot lines of existing buildings or structures on the lot, if any.
- ☐ 4. The dimensions and elevations (in feet) of proposed buildings or structures on the lot or of any addition or structural alteration to existing buildings or structures. A blueprint or similar accurate building plan [11"X17"] of proposed buildings or additions is required.
- ☐ 5. The total amount of square feet of floor space for each floor of proposed buildings or structures on the lot or of any addition or structural alteration to existing buildings or structures.
- ☐ 6. The setback (in feet) from all lot lines of proposed buildings or structures on the lot or of any addition or structural alteration to existing buildings or structures.
- ☐ 7. The height (in feet) of existing buildings or structures on the lot.
- ☐ 8. The height (in feet) of proposed buildings or structures on the lot or of any addition or structural alteration to existing buildings or structures.
- ☐ 9. The name and location of the existing road(s), public and private, adjacent to the lot.
- ☐ 10. The number of dwelling units existing (if any) and proposed for the lot.
- ☐ 11. The location, dimensions (in feet), and number of parking spaces existing (if any) and proposed.
- ☐ 12. **FOR COMMERCIAL, SHOPPING CENTER, AND INDUSTRIAL USES:** The location, dimensions (in feet), and number of loading/unloading spaces.
- ☐ 13. The location and dimensions (in feet) of any existing or proposed easements on the lot.
- ☐ 14. The location and description of existing and proposed landscaping and buffer areas on the lot.
- ☐ 15. The existing topography of the lot, at contour levels of two (2) feet, and a final grading plan.
- ☐ 16. The locations of all exterior lighting fixtures to include their initial lumen ratings and documentation that they are, and will be installed as, full cutoff fixtures (if 2,500 initial lumens or greater) as defined in the Zoning Resolution.
- ☐ 17. Provide a copy of the driveway culvert pipe permit issued by the appropriate governmental authority, if applicable.
- ☐ 18. Documentation shall be provided that the appropriate governmental agency has approved the sewage treatment facility to serve the proposed use on the lot.
- ☐ 19. **For lots under five (5) acres:** Provide an erosion control plan as discussed with the Zoning Inspector.
For lots five (5) acres and over: Provide two (2) copies of the approval letter or permit, as applicable, from the Geauga Soil and Water Conservation District concerning the stormwater management and erosion control plan as required in the Zoning Resolution.
- ☐ 20. Does the listed parcel on this application have a gas well? ☐ YES ☐ NO ☒ NA
- ☐ 21. Are there any gas and oil wells within 750 feet of this structure? ☐ YES ☐ NO ☒ NA

SECTION 4-SIGNATURE

For Official Use: ☐ Section Four is Complete.

A NON-SUFFICIENT FEE OF \$30.00 will be charged to the applicant for all returned checks. **All zoning fees are non-refundable.**

I here-by certify that all of the information supplied in this application and attachments hereto are true and correct to the best of my knowledge, information, and belief.

I here-by acknowledge that the penalty for falsification is imprisonment for not more then six (6) months, or a fine of not more than one thousand dollars (\$1,000), or both.

I here-by consent to the inspection of the subject lot and of any buildings or structures to be constructed there-on by the Township Zoning Inspector during construction and within thirty(30) days from the completion of any buildings or structures.

I here-by acknowledge that I understand that if the construction or use described in the zoning certificate has not begun within six (6) months from the date of issuance, or if construction has begun within six (6) months and said construction has not been completed within two (2) years from the date of issuance, said zoning certificate shall be revoked by the Zoning Inspector.

I here-by acknowledge receipt of a wetlands booklet (Army Corp. of Engineers).

APPLICANT'S SIGNATURE: _____ **DATE:** _____

PRINT NAME: _____

NOTE: THE ZONING INSPECTOR SHALL APPROVE OR DISAPPROVE THIS APPLICATION WITHIN THIRTY (30) DAYS.

ADDITIONAL IMPORTANT INFORMATION AND TELEPHONE NUMBERS		
OFFICE NAME	PURPOSE	PHONE NUMBER
GEAUGA COUNTY BUILDING DEPT	A building permit is required for all construction in Geauga county.	1.440.279.1780
GEAUGA SOIL AND WATER	For assistance with stormwater management and erosion control plans.	1.440.834.1122
GEAUGA COUNTY HEALTH DEPT.	For new construction or expansion.	1.440.279.1900
CHESTER TWP. FIRE RESCUE DEPARTMENT	For all Commercial or Industrial construction.	1.440.729.9951
OHIO EPA (TWINSBURG OFFICE)	For assistance with obtaining applicable permits	1.800.686.6330
GEAUGA COUNTY ENGINEER'S OFFICE	Driveway permit for culvert pipe installation for all new construction.	1.440.279.1800
ARMY CORP. OF ENGINEERS (ORWELL OFFICE)	For wetland delineation.	1.440.437.5841

FOR OFFICAL USE ONLY:

CERTIFICATE NUMBER:

ALL SECTIONS ARE COMPLETE:☐

THIS APPLICATION IS INCOMPLETE (MORE INFORMATION NEEDS TO BE PROVIDED):☐ DATE: _____

DATE APPLICATION RECEIVED:_____

DATE OF ACTION ON APPLICATION:_____

VARIANCE: _____

DECISION: ☐APPROVED ☐DENIED

DATE ZONING CERTIFICATE ISSUED:_____

DATE APPLICATION DISAPPROVED:_____

IF APPLICATION DISAPPROVED, REASONS FOR DISAPPROVAL:_____

AMOUNT OF FEE PAID: \$_____ DATE PAID: _____ ☐CASH ☐CHECK # _____

I HERE-BY ACKNOWLEDGE THE RECEIPT OF THIS APPLICATION FOR A ZONING CERTIFICATE THIS
_____ DAY OF _____, 20_____.

CHESTER TOWNSHIP ZONING INSPECTOR

NOTES: _____
