

File No. _____

Certificate No. _____

**APPLICATION FOR ZONING CERTIFICATE
VILLAGE OF ASHLEY**

Type of Work (Check One)

New Building _____

Addition _____

Change of Use _____

Repair _____

Remodel _____

Other _____

If the item does not apply, indicate by writing "N/A" in the appropriate blank.

1. Applicant: _____ Phone No.: _____

2. Address: _____

3. Land Owner: _____ Phone No.: _____

4. Address: _____

5. Property Location: _____

6. Subdivision Name: _____

7. Acreage if not a Subdivision Lot: _____

8. Lot Area: _____ Zoning District: _____

9. Present Use: _____ Proposed Use: _____

10. Type of Building: Residential ___ Commercial ___ Industrial ___ Other (Explain) _____

11. Type of Sewage Disposal (Public, Private, Septic, Other): _____

12. Lot Width at Building Line: _____ Lot Depth: _____

13. Building Area: _____ Percent of Lot Coverage: _____

14. Building Height: _____ No. of Stories: _____ Parking Spaces Provided: _____

15. Front Yard Setback (from ROW to proposed building): _____

16. Garage Setback (from front of proposed dwelling to proposed garage): _____

17. Side Yard Width, Right: _____ Side Yard Width, Left: _____

18. Rear Yard Depth (from rear of proposed building): _____