



Founded 1875

Village of LaGrange

301 Liberty Street
LaGrange, OH 44050
440-355-5555
FAX: 440-355-5250
lagov4@windstream.net

Application for Zoning Permit for COMBINING LOTS

To the Village of LaGrange,

The undersigned hereby applies for a zoning certificate for the following use, to be issued on the basis of the representation contained herein, all of which the applicant certifies as true and correct:

Property Owner: _____

Address: _____ City: _____ Zip Code: _____

Phone #: _____ Fax #: _____

Applicant Name: _____

Address: _____ City: _____ Zip Code: _____

Phone #: _____ Fax #: _____

Location Address: _____ Zoning District: _____

Permanent Parcel #: _____

Please attach the requirements of Section 339 of Village of LaGrange Subdivision Rules and Regulations.

Also include the following:

1. Dimensions of existing/proposed buildings.
2. Show distance of existing/proposed buildings from proposed property lines and from other buildings.
3. If zoned other than residential, show existing/proposed parking, loading zones, etc.

In addition to the information provided hereon, the applicant for this zoning certificate shall provide all necessary drawings, notes, specifications, approvals, and other necessary information as required by the Village of LaGrange Zoning Code, and Subdivision Rules and Regulations.

Review fee for combining lots is **\$75.00 per lot combined, minimum \$150.00**, and is payable to the Village of LaGrange at the time of the application.

I understand that Zoning approval for combining these lots does not imply or insure that the Village of LaGrange Planning Commission will authorize the lot combination.

Applicant

Date