CONCRETE DRIVEWAYS



Mayor Village Administrator Administrative Assistant Kristy Thome Police Chief

Tim Howard Kevin Siferd Mike Holler

VILLAGE OF ENON, OHIO

PROCEDURES FOR OBTAINING A ZONING PERMIT

- 1. Obtain a Zoning Permit Application from the Village of Enon
 - a. Applications may be picked up at the Government Center (M-F 8a-5p), requested by mail, or downloaded from our website (www.enon-oh.gov)
- 2. Complete all information on the upper portion of the Zoning Application
- 3. Prepare a detailed site plan of proposed work to be done
 - a. Site plan should include the following information:
 - i. Existing property lines with dimensions
 - ii. Location of all existing structures on the property
 - iii. Dimensions of existing structures and total square feet
 - iv. Set backs from all property lines of existing structures (length, width)
 - v. Location and dimensions of proposed construction
 - vi. Set backs from all property lines of proposed construction
- 4. Obtain a site approval from the Clark County Health Department
 - a. Contact the Health Department at direct line 937-717-2451 (optin #3) or main line at 937-390-5600 to schedule a site inspection
 - b. Properties with sanitary sewer are not required to obtain Health Department approval
- 5. Submit required information to the Village of Enon for review
- 6. Applicant will be contacted after information has been reviewed
 - a. Additional information or clarification may require a scheduled meeting with Village Staff
 - Approved permits must be picked up at the Government Center
 - c. Required fees must be paid in full at the time the permit is issued (payments can be made by check, money order, credit card, or cash)
- 7. Follow up inspections will be done by Village Staff (Footer Inspections require at least a 24 hr notice)
- 8. Any questions, please contact the Government Center at 937-864-7870

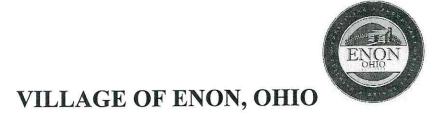
RIGHT OF WA	AY PERMIT REQU	JIRED FOR	DRIVEW	AYS TO T	HE ROADWAY	
	•					77.
	363 E Main Street	PO Box 232	Enon, OH	45323	Ph: 937.864.7870	



VILLAGE OF ENON ZONING PERMIT APPLICATION

No._____

Owner:	Address:					
oned: Residential Business Type Building:						
Home Phone ()	Cell Phone ()					
Nature of Work Repair □ Remodel	□ Construct □ Other □					
Which applies to your residence	Septic Sewer					
Is your property located on a corner lot?	No					
Pouring Concrete? Yes No						
Describe (Please include measurements)	E .					
PLEASE SUBMIT DRAWING (including p						
Name of Contractor:	Est Cost \$					
Contractor's Phone Number_()						
Date Commenced	Anticipated Completion Date					
**************************************	exxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx					
Date turned in:	Amount Due \$					
Date Paid:	Receipt Number					
Amount Paid \$ Paid by:						
Office Clerk:						



RIGHT-OF-WAY PERMIT APPLICATION

Name of Applica	nt:		Date:					
Property Owner Contractor Address:								
Scheduled Start	Date:	Compl	etion Date:					
Scope of Work:								
		and the second second						
			Allen and the second					
grants permission t at the above stated	o the applicant to per location. Furthermo	rform certain spectore, the applicant a	o. 901.01, the Village Admin cified work in the Village of lagrees to comply with all registrator, including the following	Enon Right-Of-Way ulations, provisions,				
Furnish a cash CONTRACT current Worknensure any an	or surety bond in the ORS: Must provide nan's Compensation	e amount determing proof of liability a Certificate. PRO ired has liability	mencement of proposed work ned by the Administrator. insurance coverage (\$1,000 OPERTY OWNER: It is you insurance coverage (\$1,000 OPERTY OWNER).	0,000 minimum) and our responsibility to				
4. Furnish maps,	plans, specifications,	, and any other ma	aterial as required by the Adr tisfaction of the Administrate	ninistrator.				
6. Follow the gen	eral standards and w and indemnify the V	ork specifications	s on file at the Enon Municipations any and all claims for d	al Building.				
8 Surrender the l	erein applied for per	rmit and all rights rvice (800-362-27	thereunder upon notification (64) at least 48 hours prior of	to do so. excavating.				
APPLICANT			ADMINISTRATOR					
***	*****	*******	*******	******				

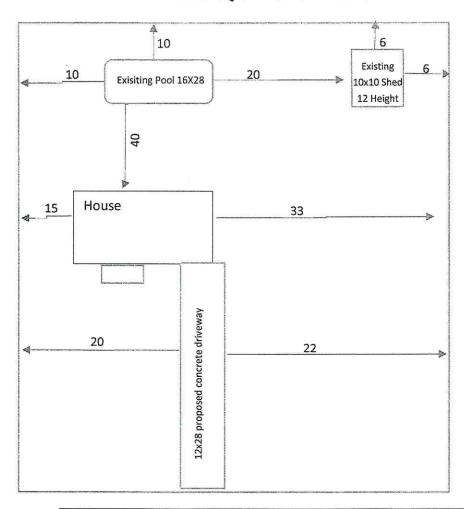
Insurance Expires On: _____ Map Attached: _____

EXAMPLE OF A SITE APPROVAL



FOR A DRIVEWAY (CONCRETE REQUIRES PERMIT – ASPHALT DOES NOT

*REQUIRES RIGHT OF WAY *



DRAW THE SHAPE OF YOUR LOT (ADD THE DIMENSIONS)

LOCATION OF ALL EXISTING STRUCTURES AND TOTAL SQUARE FEET

SET BACKS FROM ALL PROPERTY LINES OF EXISTING STRUCTURES

LOCATION & DIMENSIONS OF PROPOSED CONSTRUCTION

SET BACKS FROM ALL PROPERTY LINES OF PROPOSED CONSTRUCTION

REQUIRES A 24 HR NOTICE FOR INSPECTIONS
PRIOR TO POURING CONCRETE