

CITY OF PATASKALA PLANNING & ZONING DEPARTMENT

621 West Broad Street, Suite 2A Pataskala, Ohio 43062

NEW COMMERCIAL CONSTRUCTION APPLICATION

(Pataskala Codified Ordinances Section 1209)

Property Information				Staff Use
Address:				Application Number:
Parcel Number:				
Development Name:				Fee:
Lot/Building Number:	Zoning:		Acres:	
Water Supply:			•	Filing Date:
☐ City of Pataskala	☐ South We	est Licking	On Site	
Wastewater Treatment:				Receipt Number:
☐ City of Pataskala	☐ South We	est Licking	☐ On Site	
				☐ Auditor Notified
Applicant Information				
Name:				Documents
Address:				☐ Application
City:		State:	Zip:	☐ Fee
Phone:		Email:	•	☐ Site Plan
				☐ Elevations
Owner Information				Erosion & Sediment Control Plan
Name:				☐ Compliance Application
Address:				Board of Health Approval – If applicable
City:		State:	Zip:	
Phone:		Email:		
Documents to Submit				
New Commercial Construction.	tion Application	: Submit one (1) copy of the New (Commercial Construction
Fee: Application fee of \$1,0)50.00			
Site Plan: Submit one (1) co	opy of a site plan	that includes a	all required informa	ation.
Elevations: Submit one (1)	copy of building	elevations that	includes all require	ed information.

Erosion and Sediment Control Plan: Submit one (1) copy of Erosion & Sediment Control plan that includes all required information. **Certificate of Compliance Application:** Submit one (1) copy of the Commercial Compliance application. Board of Health Approval: Approval from the Licking County Board of Health indicating that the property is suitable for a well and septic system if the property will not be served by central water and sewer. **Important Information** Applicability: A New Commercial Construction Application is required for all new commercial, industrial and institutional construction. **Building Permit:** All new commercial construction will require a building permit from the Licking County Building Department. Please call the Licking County Building Department at 740-349-6671 for additional information. Inspections: The Pataskala Planning and Zoning Department will inspect the property after construction has been To schedule an inspection please call the Zoning Inspector at 740-927-3885. **Site Superintendent** Name: Title: Phone: Email: Signatures I certify the facts, statements and information provided on and attached to this application are true and correct to the best of my knowledge and understand the requirements for new commercial construction. Also, I authorize City of Pataskala staff to inspect the property as necessary as it pertains to this application. Applicant: Date: Owner: Date: **Zoning Inspector** ■ Approved ■ Disapproved Zoning Inspector: Approval Date: Expiration Date: Conditions: