



# CITY OF PATASKALA PLANNING & ZONING DEPARTMENT

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

## ADDITION PERMIT APPLICATION

(Pataskala Codified Ordinances Section 1209)

| Property Information |        |
|----------------------|--------|
| Address:             |        |
| Parcel Number:       |        |
| Zoning:              | Acres: |

| Applicant Information |        |      |
|-----------------------|--------|------|
| Name:                 |        |      |
| Address:              |        |      |
| City:                 | State: | Zip: |
| Phone:                | Email: |      |

| Property Owner Information |        |      |
|----------------------------|--------|------|
| Name:                      |        |      |
| Address:                   |        |      |
| City:                      | State: | Zip: |
| Phone:                     | Email: |      |

| Staff Use                                 |
|---|
| Application Number:                       |
| Fee:                                      |
| Filing Date:                              |
| Receipt Number:                           |
| <input type="checkbox"/> Auditor Notified |

| Documents                                       |
|---|
| <input type="checkbox"/> Application            |
| <input type="checkbox"/> Fee                    |
| <input type="checkbox"/> Rendering              |
| <input type="checkbox"/> Impact Fee - See Below |

| Addition Information   |
|--|
| Describe the Project (Materials, dimensions, height, distance to property lines, colors, etc.) |
|  |
|  |

| Documents to Submit  |
|--|
| <b>Addition Permit Application:</b> Submit one (1) copy of the Addition Permit Application.  |
| <b>Fee:</b> Application fee of \$50.00   |
| <b>Rendering:</b> Submit one (1) color copy of a rendering depicting what the addition will look like.   |
| <b>Site Plan:</b> Submit one (1) copy of a site plan showing the following: <ul style="list-style-type: none"> <li>• Location of all existing buildings and structures.</li> <li>• Addition location, dimensions, and materials.</li> <li>• Addition distance to front, side, and rear property lines.</li> <li>• Property lines, easements and right-of-way.</li> </ul> |
| <b>Impact Fee (Commercial-Institutional Only):</b> Submit one (1) copy of the Impact Fee Calculation Sheet. Pursuant to Chapter 1294 (Ordinance 2021-4396) the City of Pataskala must collect Impact Fees for any Addition to an existing Commercial Structure.  |

**Important Information**

**Applicability:** An addition permit is required for the expansion of any building (i.e. room additions, attached garages, etc.)

**Addition Regulations:** All additions must meet the following regulations:

- Additions must meet the setback requirements for a principal structure of the zoning district in which the property is located.
- Additions must meet the height requirements for a principal structure of the zoning district in which the property is located.
- An addition cannot be located in a recorded easement.
- **It is the property owner’s responsibility to determine property lines and certify the addition meets the appropriate setbacks at the time of construction.**

**Homeowners Association:**

- It is important to check with the neighborhood Homeowners Association, if applicable, for any addition requirements they may have.
- Additions may require approval from the Homeowners Association prior to construction.

**Building Permit:**

- An addition may require a building permit from the Licking County Building Code Department.
- Please contact the Licking County Building Code Department at 740-349-6671 for additional information.

**Inspections:**

- The Pataskala Planning and Zoning Department will inspect the addition upon completion to ensure that it complies with the approved permit.
- To schedule an inspection please call the Zoning Inspector at 740-927-3885.

**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 an addition. Also, I authorize City of Pataskala staff to inspect the property as necessary as it pertains to this application.

|                            |       |
|----------------------------|-------|
| Applicant (Required):      | Date: |
| Property Owner (Required): | Date: |

**Zoning Inspector**

|                                   |                                      |  |                  |
|-----------------------------------|--------------------------------------|--|------------------|
| <input type="checkbox"/> Approved | <input type="checkbox"/> Disapproved | Floodplain: Yes <input type="checkbox"/> No <input type="checkbox"/> | PZC/BZA:         |
| Zoning Inspector:                 |                                      | Approval Date:   | Expiration Date: |

Conditions: