

## CHECKLIST FOR APPLICATION FOR ACCESSORY BUILDING

**\*\*PLEASE READ ALL INFORMATION CONTAINED IN THIS PACKET\*\***

**PLEASE NOTE THAT NO PACKET CAN BE ACCEPTED WITH ITEMS MISSING.**

\_\_\_\_\_ **Application must be completely filled out (no blank spaces)**

\_\_\_\_\_ Site plan **drawn to scale** showing actual dimensions and shape of lot, location of proposed buildings and existing buildings, and driveway plan. Site plan to indicate how many feet structures will be from all property lines. (see example) Can be drawn on legal survey.

\_\_\_\_\_ Legal Description of property (please ask us for assistance if needed on this item)

\_\_\_\_\_ **Signed Health Department Notice about Fairfield Dept. of Health Plumbing Permits**

\_\_\_\_\_ Accessory Building Fee: \$150

**Please:**

**\*\* Application must be filled out in pen. \*\***

**\*\* Homeowner (not builder) must sign permit applications. \*\***

**\*\* Signatures must be original (not faxed or copied) \*\***

**\*\* Please make checks payable to Bloom Township \*\***

**BLOOM TOWNSHIP  
8490 LITHOPOLIS ROAD  
CARROLL, OHIO 43112  
(614) 837-4387  
Fax: (614) 837-7576**

**ALL APPLICATIONS MUST BE SIGNED BY  
THE PROPERTY OWNER.**

**THE ONLY EXCEPTION WOULD BE IF THE  
APPLICANT HAS POWER OF ATTORNEY**

**THANK YOU,**

**BLOOM TOWNSHIP ZONING DEPARTMENT**

# Bloom Township Zoning Department

8490 Lithopolis Road

Carroll, Ohio 43112

(614) 837-4387

Fax (614) 837-7576

## Application for Accessory Building

# \_\_\_\_\_

The undersigned understands that per Bloom Twp. Zoning Resolution 412-414, all permits shall be conditioned upon the commencement of work within one year of the filing of the application. If work is not completed within 2 years of the date of issuance, the permit shall expire. Applicant has received a copy of Bloom Township Zoning 808.3 (Accessory Buildings) and agrees to comply with the terms set forth in the zoning resolution.

**Applicant must fill out application in its entirety before permit will be issued.**

Name of property owner: \_\_\_\_\_

Phone (        ) \_\_\_\_\_, Parcel # of property for permit: \_\_\_\_\_

Contact phone number (builder) \_\_\_\_\_

Address of property where permit is to be issued: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Square footage of current house on lot: \_\_\_\_\_ sq. ft.

Size of Lot: \_\_\_\_\_ acres, Road Frontage: \_\_\_\_\_ feet

**Measuring from the building line, indicate how many feet your accessory building will be from:**

1) Front building line: \_\_\_\_\_ feet

2) From rear of accessory building to rear yard line \_\_\_\_\_ feet,

3) From side of accessory building to right side yard line \_\_\_\_\_ feet

4) From side of accessory building to left side yard line \_\_\_\_\_ feet

5) Total height of accessory building will be: \_\_\_\_\_ feet

6) Total square footage of accessory building will be: \_\_\_\_\_ sq. ft.

Will your accessory building have plumbing? Please circle:    Yes        No

Upon completion, I will use this accessory building for: \_\_\_\_\_

This accessory building will not be used for business purposes.

### Please:

**\*\*Application must be filled out in pen. \*\***

**\*\*Homeowner (not builder) must sign permit applications. \*\***

**\*\*Signatures must be original (not faxed or copied) \*\***

**\*\*Please make checks payable to Bloom Township\*\***

### Fees will be doubled if building begins without permit.

I certify that the information supplied in this application is true and correct and that all information requested has been supplied with this application. I further certify that no construction has begun and will not commence until permits have been granted.

\_\_\_\_\_  
Signature of Homeowner

Date: \_\_\_\_\_

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For official use only

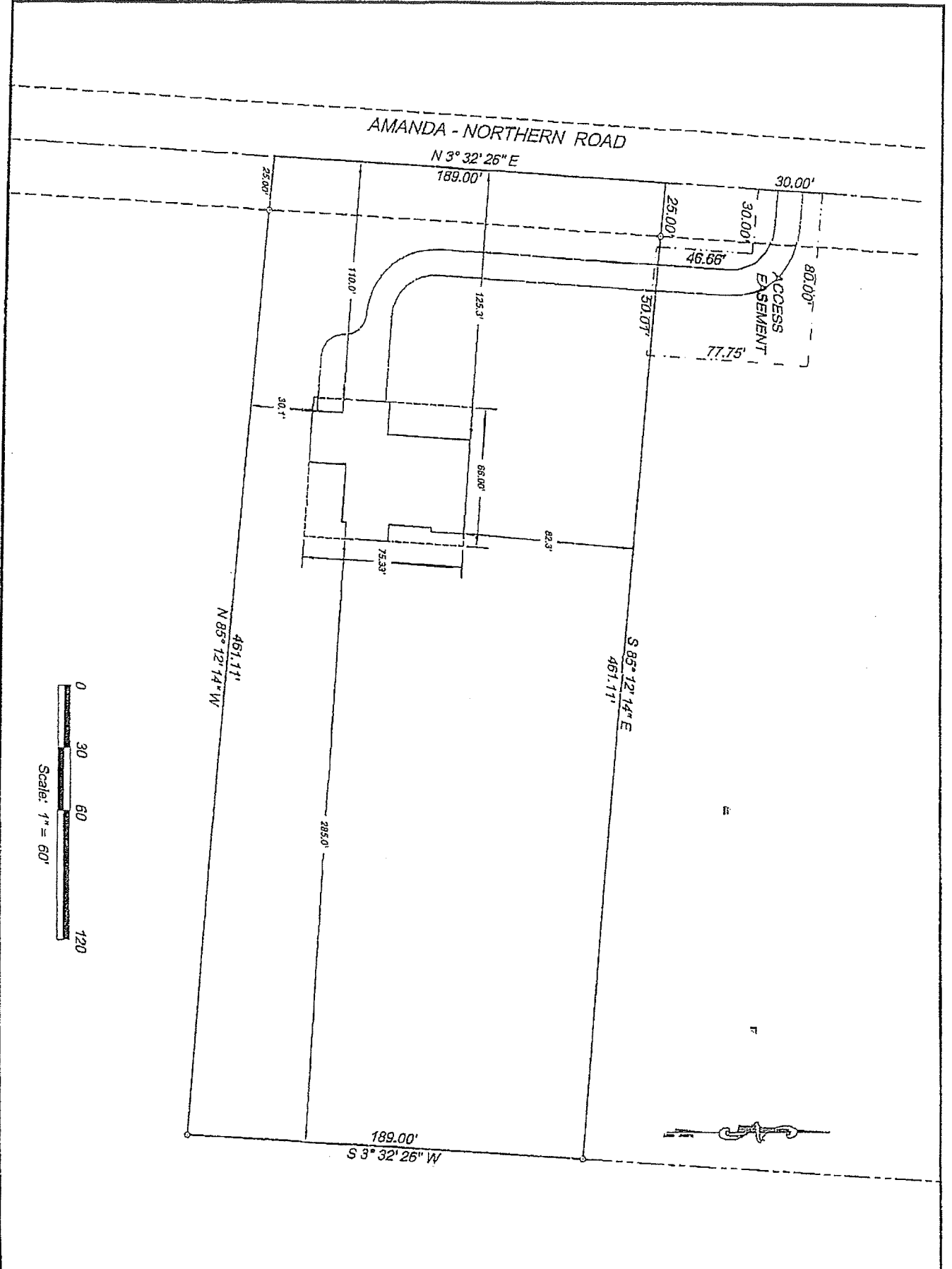
\_\_\_\_\_  
*Tina Leising, Zoning Processor*

\_\_\_\_\_  
*Date Received*

**Approval or Denial:**

\_\_\_\_\_  
*Anne D. Cyphert, Board Administrator*

\_\_\_\_\_  
*Date*



EXAMPLE OF VALID "TO SCALE" SITE PLAN



**Public Health**  
Prevent. Promote. Protect.

Fairfield Department of Health  
Environmental Division

# MEMO

To: **Township Zoning Inspectors**

From: Dennis Oliver, Plumbing Inspector

Re: Plumbing Permits and Inspections Required Update

Date: May 13, 2019

**Please inform those in your area that are building new homes or new additions to homes or new buildings with plumbing of this requirement. Please inform those who are remodeling and/or building an addition of this requirement.**

Homeowners building in Fairfield County should not become frustrated during the construction of their home because they have not received all the information they needed from the Health Department or any other source for information they depend on.

This is a letter to inform you that the Fairfield Department of Health is requiring plumbing permits and plumbing inspections to be done on new residential plumbing installations and for plumbing remodels on homes built on or after March 1, 2006. Plumbing permits and plumbing inspections are required for new or existing commercial buildings.

At this time, a home built before March 1, 2006 does not require a plumbing permit or plumbing inspections for remodeling that requires changes to their existing plumbing system inside the existing home.

However, if your township has a building department that requires plumbing permits and plumbing inspections, on homes built before March 1, 2006 then the Fairfield Department of Health (FDH) will do the permitting and inspections for these homes.

**The FDH has no plumbing permits and inspections required for manufactured HUD homes and trailers.**

The FDH does not do plumbing permits and inspections for the following corporation areas that are inside the county: **Canal Winchester, Columbus, Lancaster, Lithopolis, Pickerington and Reynoldsburg.**

If you have any questions please call me at 1-740-652-2819, I am in on Mondays, Wednesdays and Fridays.

The Fairfield County Health Department location and other information are at the bottom of this memo.

Thank You

**NOTICE ABOUT FAIRFIELD DEPARTMENT OF HEALTH PLUMBING PERMITS:**

The Fairfield Department of Health requires any new structure to have a plumbing permit if there is plumbing being added to the structure. In a collaborative effort, Bloom Township Zoning Department has agreed to provide this document to the Fairfield Health Department regarding all new construction in our township to obtain the necessary permits, if applicable, from their department. Call (740) 652-2800 to speak with a Department of Health Representative.

PROPERTY LOCATION:

TYPE OF CONSTRUCTION: (new residence, residential addition, outbuilding, etc)

I will install new plumbing with my new structure: \_\_\_\_\_yes or \_\_\_\_\_no

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

\_\_\_\_\_  
Phone Number

**Bloom Township  
8490 Lithopolis Road  
Carroll, Ohio 43112  
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**ACCESSORY BUILDINGS**

**REQUIREMENTS FOR ACCESSORY BUILDINGS AS AMENDED BY BLOOM TWP ZONING COMMISSION AND THE BOARD OF TRUSTEES:**

Amend Section 808.3 as follows:

- A. It shall not contain or be used as a dwelling unit.
- B. It shall not exceed twenty-five feet in height.
- C. It shall meet all yard requirements of the principle use, except that:
  - 1. An accessory building attached to the principle building on a lot shall comply in all respects with requirements of these regulations applicable to the principle building.
  - 2. Accessory buildings, structures and uses which are not part of the main building shall not be located closer than ten (10) feet from the main building, may be built within five (5) feet of the rear lot line, and must conform to the front yard building setback line and side yard width\*. An accessory building which is not a part of the main building shall not occupy more than 30 percent of the required rear yard.
- D. Sun porches that are fully enclosed must meet the same requirements as an accessory building.
- E. No accessory building shall be erected within any required front yard including gazebos and picnic areas. Corner lots and unusual lots will be handled at the discretion of the Zoning Inspector.
- F. For lots less than three (3) acres, the total area for all accessory buildings shall not exceed the total gross floor area of the principle structure. No more than two (2) accessory structures shall be constructed on a parcel.

**\*SETBACKS FOR ACCESSORY BUILDINGS:**

Twenty-five (25) feet from each side  
Fifty (50) feet from the front  
Five (5) feet from the rear