

**CHECKLIST FOR APPLICATION FOR RESIDENTIAL ADDITION**

**\*\*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)

\_\_\_\_\_ **Two (2)** sets of architectural drawings

\_\_\_\_\_ Residential Additions Fee \$500.00

**PLEASE:**

**\*\*APPLICATIONS MUST BE FILLED OUT IN PEN (no pencil) \*\***

**\*\*HOMEOWNER (not builder) MUST SIGN PERMIT APPLICATION. SIGNATURE MUST BE ORIGINAL – NOT A COPY\*\***

**\*\*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, OH 43112**  
**(614) 837-4387**  
**(614) 837-7576 (Fax)**

**Application for Residential Addition Permit:**

The undersigned understands per Bloom Township Zoning Resolution 412-414, all permits shall be conditioned upon the commencement of work within one year upon the filing of the application. If work is not completed within 2 years of the date of issuance, the permit shall expire. The undersigned swears or affirms that all information provided below is truthful and accurate.

**SECTION I.**

Property owners name(s) \_\_\_\_\_

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

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

Daytime/Evening/Cell Phone Numbers: (     ) \_\_\_\_\_

Contact name and phone number \_\_\_\_\_

Size of Lot \_\_\_\_\_ Acres

Road Frontage at Building Line (50' from the right of way) \_\_\_\_\_

Front Yard Depth (measured from edge of right of way to front of house) \_\_\_\_\_ feet

Rear Yard Depth (measured from rear of house to rear property line) \_\_\_\_\_ feet

Right Side Width (measured from side of house to right property line) \_\_\_\_\_ feet

Left Side Width (measured from side of house to left property line) \_\_\_\_\_ feet

Total Square Footage of Living Space (excluding garages, basement, and unheated areas) \_\_\_\_\_

**PLEASE NOTE: ALL SPACES ABOVE MUST BE COMPLETELY FILLED IN TO AVOID DENIAL OF APPLICATION.**

**SECTION II.**

To complete application, the following information must be attached to this application:

- Legal description
- Site Plan DRAWN TO SCALE showing the plans for the proposed structure, as well as the actual shape of lot to be built on, exact size and location of any existing buildings if any and the location and dimensions of proposed building or alterations (note: Driveway plan must be included and how many feet each is from all property liens.
- Residential Additions fee of \$500.00

***I certify that the information supplied in this application is true and correct and that all information requested is attached to it. I FURTHER CERTIFY THAT NO CONSTRUCTION HAS BEGUN WITHOUT THE PROPERTY ZONING PERMITS ISSUED.***

Property Owner \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner \_\_\_\_\_ Date: \_\_\_\_\_

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*For official use only*

\_\_\_\_\_  
*Karen Price, Zoning Processor*

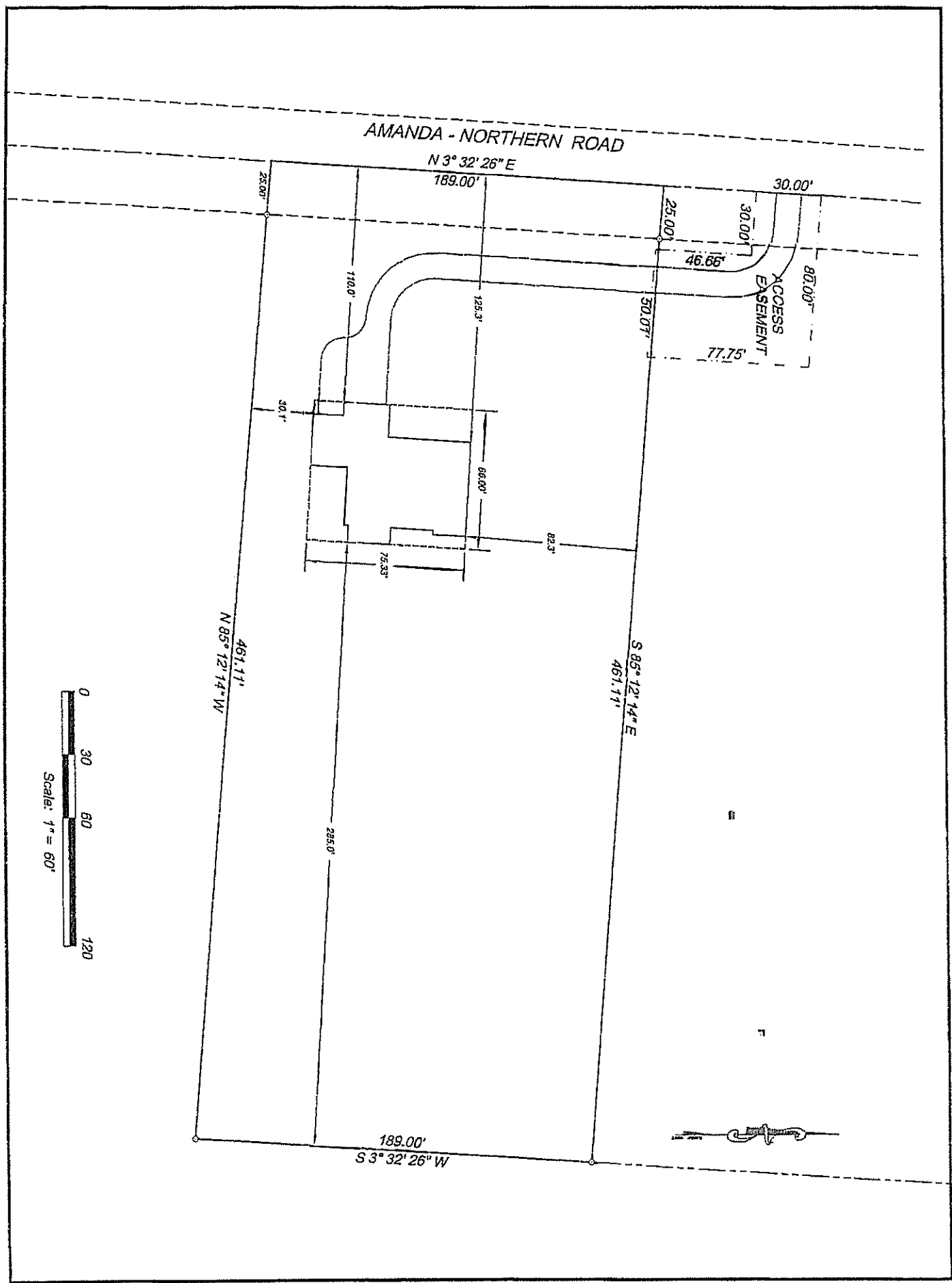
\_\_\_\_\_  
*Date Received*

**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

Date: April 22, 2016

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 and additions 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 or to homes that are constructing an addition that is adding to their existing plumbing system.

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

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

**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: **Baltimore, Canal Winchester, Columbus, Lancaster, Lithopolis, Pickerington and Reynoldsburg.**

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.

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

