

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 paper.
- _____ Legal Description of property (please ask us for assistance if needed on this item).
- _____ Signed "Notice About Fairfield Department Of Health Plumbing Permits" form. NOTE: This form must be submitted and marked with "yes" or "no".
- _____ One (1) set of architectural drawings not to exceed 11 x 17 in size.
- _____ Residential Addition Fee \$500.

PLEASE:

- ** Application must be filled out in pen. ****
- ** Homeowner (not builder) must sign permit application. ****
- ** Signatures MUST be original, not faxed, copied or electronic. ****
- ** Make checks payable to Bloom Township. ****

Setback Requirements For A Residential Addition

Twenty-five (25) feet from each side
Fifty (50) feet from the edge of road right of way - front
Fifty (50) feet from the rear

**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 (Phone) / (614) 837-7576 (Fax)

Application for Residential Addition Permit

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): _____

Property Address where permit is to be issued: _____

Current Mailing Address: _____

Property Owner Phone Number: _____ Parcel #: _____

Builder's Name / Phone Number: _____

Size of Lot: _____ acres

Road Frontage at Building Line (50' from the right of way): _____ feet

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, 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 lines).
- Residential Addition Permit Fee \$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:** _____

-----**FOR OFFICIAL USE ONLY**-----

Zoning Processor

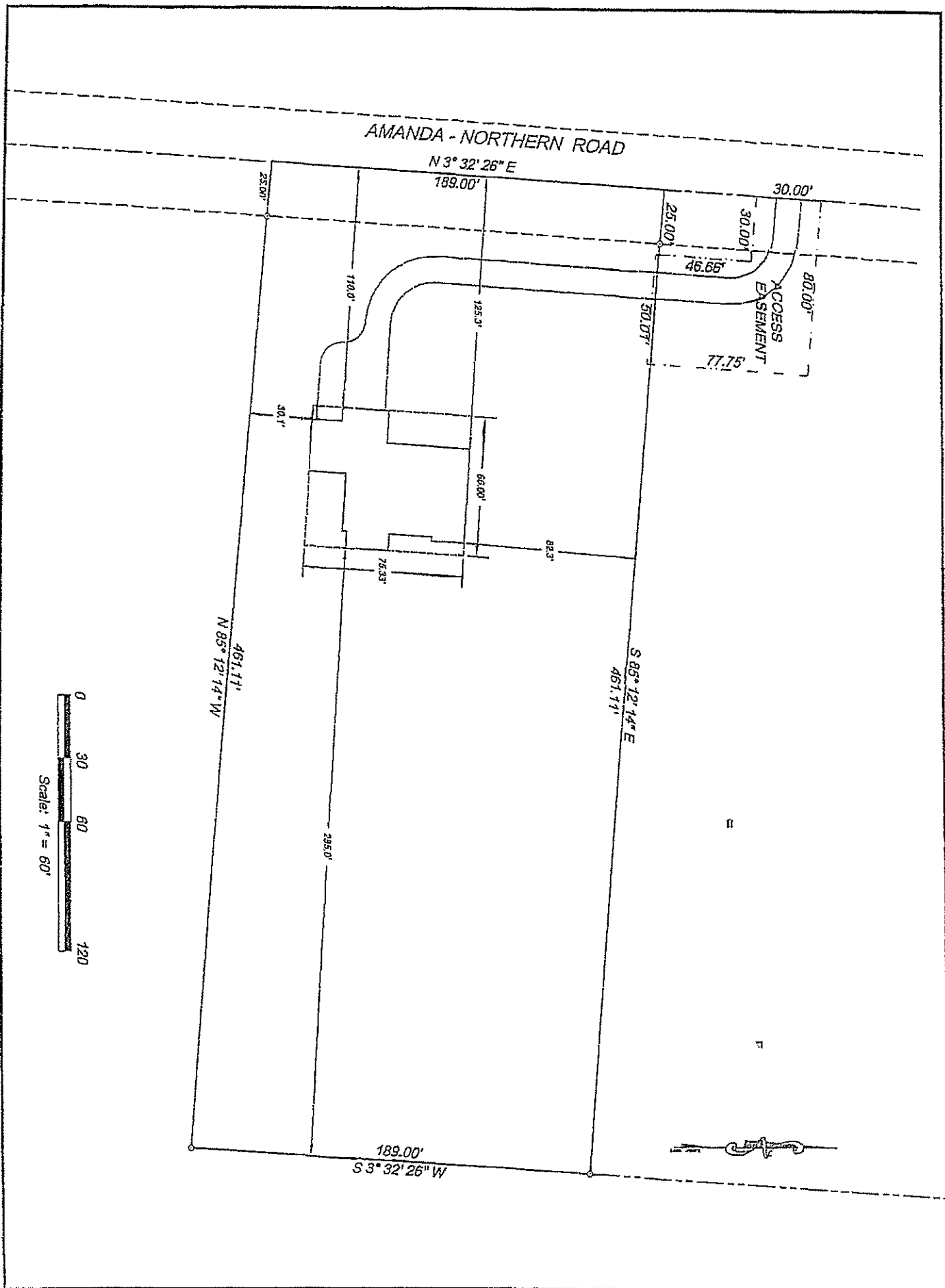
Date Received

Approval or Denial:

Anne D. Cyphert, Board Administrator

Date

EXAMPLE OF VALID "TO SCALE" SITE PLAN





PublicHealth
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