



BRIMFIELD TOWNSHIP ZONING CERTIFICATE APPLICATION

1333 Tallmadge Road Kent, Ohio 44240

Telephone 330-678-0739 FAX 330-678-6626 Email: zoning@brimfieldohio.gov

Date: _____

Fee for this request: \$25.00

Applicant's Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Parcel Number: _____

Location: _____

Zoning District: _____

I would like to request the following: _____

- Deck
- Fence
- Pool
- Accessory Building

Description, Dimensions, Location & Height: _____

Please provide site sketch



This site plan shall become part of my application for a zoning certificate and all dimensions are accurate to the best of my knowledge.

Signed _____ **Date** _____
Applicant Signature

Signed _____ **Date** _____
Owner Signature

Approved _____ **Date** _____
Zoning Inspector Signature

Denied _____ **Date** _____
Zoning Inspector Signature

Reason for Denial: _____

Office Use Only

Certificate # _____