

**DEPARTMENT OF BUILDING INSPECTION  
CITY OF WASHINGTON  
105 NORTH MAIN STREET, WASHINGTON C.H. OHIO 43160  
PHONE 740-636-2353 FAX 740-636-2349**

**OCCUPANCY/ZONING PERMIT APPLICATION**

PROJECT ADDRESS \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

PROJECT ADDRESS OWNER'S NAME \_\_\_\_\_

Address \_\_\_\_\_ Phone No. \_\_\_\_\_

CONTRACTOR'S NAME \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

ESTIMATED COST OF THE PROJECT: \_\_\_\_\_

EXISTING USE \_\_\_\_\_

PROPOSED USE \_\_\_\_\_

DETAILED DESCRIPTION OF PROPOSED DEVELOPMENT OR USAGE:

\_\_\_\_\_

\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Owner's Signature: \_\_\_\_\_ Date \_\_\_\_\_

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**OFFICIAL USE ONLY**

Zoning \_\_\_\_\_ Floodplain Yes No / Application Approved Disapproved

Comments: \_\_\_\_\_

\_\_\_\_\_

Official's Signature \_\_\_\_\_ Date \_\_\_\_\_