



SIDEWALK, CURB CUT & OCCUPANCY PERMIT APPLICATION

Application Number: _____ Date: ____/____/____

Fee:

Single Family - \$325

Total Fee Amount: \$ _____ Paid Check # _____ /Cash: \$ _____

1. Applicant Name: _____ Phone: _(____)____-_____
2. Property/Permit Address: _____ Johnstown, OH
3. E-mail: _____
4. Location of Sidewalk: On curb: ____ or Off Curb: ____ How far from Curb: ____' ____"
5. Will the Proposed Sidewalk Require Any Special Conditions? Yes: ____ No: ____
If yes, explain - _____
6. Will the Sidewalk Connect with a Pedestrian Crosswalk? Yes: ____ No: ____
7. Will you be required to add an ADA ramp? Yes: ____ No: ____

IN ADDITION, THE FOLLOWING MUST ACCOMPANY THIS APPLICATION:

- Plans showing location of sidewalk
- Legal Description

Applicant's Signature: _____ Date: ____/____/____

Office use only:

Date Received in Office ____/____/____ By: _____

Date Permit Approved/Issued ____/____/____ By: _____

Date of Inspection if Required ____/____/____ By: _____