City of Johnstown
Administrative Offices
www.johnstownohio.org

CITY OF JOHNSTOWN, OHIO

599 S. Main Street
Johnstown, Ohio 43031
Telephone: 740-967-3177

DECK PERMIT APPLICATION CHAPTER #1127

Application Number: _____Date:_____/_____/_____

FEES:

$50.00 (Residential)
$100.00 (Commercial)

Total Amount: $_____ Paid: Check #: _____Cash: _$_____

(PLEASE PRINT)

1. Applicant: _____
2. Phone:_(_____)_____-_____E-mail: _____
3. Property Owner:_____Zoning District:_____
4. Property Address: _____Johnstown, Ohio
5. Contractor: _____ Phone:_(_____)_____-_____
6. Deck Size: Width: _____ft_ Length: _____ft_ Square Feet: _____
7. Deck is Attached:_____ or Un-Attached:_____Height From Ground:_____

Licking County Building Department must inspect all decks that are either attached and or greater than 200 square feet. A Johnstown approved Deck permit and Zoning Certificate is required prior to receiving a Licking County Building code permit. Phone number for LCBC: (740) 349-6671.

The undersigned applies for a deck permit for the following use: said permit to be issued based on the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct and agrees to follow all applicable laws.

Applicant's Signature:_____

- **Please provide one (1) scaled plan showing the lot, house, and proposed deck location. Attach any requested, supplemental or necessary documentation.**

Contact OUPS Before Digging At # 811

OFFICE USE ONLY:

Date Received:_____/_____/_____ Received By:_____

Zoning Inspector Signature: _x_____

Additional Comments:_____