



City of Mentor on the Lake Zoning Permit Application

Owner Name: _____

Phone #: _____

Address: _____

City/Zip: _____

Type of Construction: _____

Location of Construction: _____

Contractor Name: _____

Phone #: _____

Address: _____

City/Zip: _____

Estimated Cost of Improvement: _____

Please attach appropriate drawings

Signature of Applicant: _____

Date: _____

---FOR OFFICE USE ONLY---

ZONING INSPECTOR

Date: _____

Approved: _____

Denied: _____

Reason for Denial: _____

BOARD OF ZONING APPEALS

Date: _____

Approved: _____

Denied: _____

Reason for Denial: _____

PLANNING AND ZONING COMMISSION

Date: _____

Approved: _____

Denied: _____

Reason for Denial: _____

- | | | | |
|--|---|--|--------------------------------|
| <input type="checkbox"/> House | <input type="checkbox"/> Addition/Alterations | <input type="checkbox"/> Permanent Sign | <input type="checkbox"/> Fence |
| <input type="checkbox"/> Detached Garage | <input type="checkbox"/> In-Ground Pool | <input type="checkbox"/> Temporary Sign | <input type="checkbox"/> Shed |
| <input type="checkbox"/> Attached garage | <input type="checkbox"/> Above Ground Pool | <input type="checkbox"/> Sandwich Board Sign | |

Permit #: _____ Permit Date: _____ Zoning Fees: _____

Road Bond Deposit \$ _____

Engineer Deposit \$ _____

Receipt #: _____

Date: _____