

**APPLICATION FOR ACCESSORY STRUCTURE ZONING CERTIFICATE  
LIBERTY TOWNSHIP, UNION COUNTY, OHIO**

P.O. Box 122 | Raymond, Ohio 43067 | (937) 303-2028 | liberty.township.zoning@gmail.com

The undersigned applies for a zoning certificate for the following use, said certificate to be issued on the basis of the information contained within this application. The applicant hereby certifies that all information provided and attachments to this application are true and correct.

IN ADDITION to this form, the applicant MUST supply:

- Construction plans, drawn to scale, showing the actual dimensions and shape of the lot, exact sizes and locations of existing buildings on the lot, and the location and dimensions of the proposed building(s) or alteration(s).
- A certified check or money order for the appropriate fee made out to LIBERTY TOWNSHIP. Cash is also acceptable and a receipt for cash payments will be provided at the time of payment. **PERSONAL OR COMPANY CHECKS WILL NOT BE ACCEPTED.** (Fee schedule is on the Liberty Township website: [www.libertytownshipunionco.com](http://www.libertytownshipunionco.com))

Location of property (address or parcel number): \_\_\_\_\_

Name of land owner: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Proposed use (barn, garage, etc.): \_\_\_\_\_

Type of construction (frame, modular, etc.): \_\_\_\_\_

Size of proposed building or addition (square feet): \_\_\_\_\_

Distance of proposed building from existing structure(s): \_\_\_\_\_

Distance of building from lot lines: Rear \_\_\_\_\_ Left: \_\_\_\_\_ Right: \_\_\_\_\_

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Address and phone number if different from land owner: \_\_\_\_\_

-----DO NOT WRITE BELOW THIS LINE-----

Application# \_\_\_\_\_ Date: \_\_\_\_\_ Certificate# \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Inspector: \_\_\_\_\_ Approved: YES NO

Reason for denial: \_\_\_\_\_