



CITY OF SIDNEY

www.sidneyoh.com

APPLICATION FOR SITE PLAN APPROVAL

I. Applicant Information

Property Owner: _____ Telephone No. _____

Mailing Address: _____

Architect/Engineer _____ Telephone No. _____

Mailing Address: _____

Contractor _____ Telephone No. _____

Mailing Address: _____

Sub-Contractor #1 _____ Telephone No. _____

Mailing Address: _____

Sub-Contractor #2 _____ Telephone No. _____

Mailing Address: _____

Please include information for other sub-contractors on separate sheet of paper.

II. Property Information

County Parcel ID No(s). _____ Lot No(s). _____

Subdivision (if applicable) _____

Street No. (if applicable) _____ Street Name: _____

Existing Use of Property _____ Proposed Sq. Ft. _____

Cost of Construction \$ _____ State Permit No(s). _____

III. Applicant Certification

I HEREBY CERTIFY THAT THE ABOVE INFORMATION AND ATTACHMENTS ARE ACCURATE TO THE BEST OF MY KNOWLEDGE. I ALSO UNDERSTAND THAT ATTENDENCE AT ALL PUBLIC HEARINGS RELATED TO THIS APPLICATION IS MANDATORY BY THE OWNER OR OWNER'S AGENT.

Signature of Applicant

Date

For Office Use Only

ORIGINAL SUBMISSION DATE: _____ APPLICATION COMPLETE DATE: _____

FEES PAID \$ _____ APPLICABLE SECTION(S) OF CODE OF ORDINANCES _____

HEARING DATES (IF APPLICABLE): _____

BUILDING DEPARTMENT

ADDRESS VERIFIED _____

CONTRACTORS REGISTERED _____

OTHER _____

INITIAL DATE

ENGINEERING DEPARTMENT

STORM DETENTION COMPLIANCE _____

FLOOD PLAIN COMPLIANCE _____

PUBLIC IMPROVEMENTS COMPLIANCE _____

UTILITY REIMBURSEMENT CALCS COMPLETE _____

OTHER _____

INITIAL DATE

FIRE DEPARTMENT

HYDRANT LOCATION COMPLIANCE _____

SPRINKLER SYSTEM COMPLIANCE _____

ACCESSIBILITY _____

HAZMAT COMPLIANCE _____

OTHER _____

INITIAL DATE

PLANNING DEPARTMENT

ZONING COMPLIANCE _____

SUBDIVISION COMPLIANCE _____

COMPREHENSIVE PLAN COMPLIANCE _____

OTHER _____

INITIAL DATE

UTILITIES

UTILITY TAP FEES PAID _____

LINE LOCATION COMPLIANCE _____

SYSTEM CAPACITY COMPLIANCE _____

UTILITY REIMBURSEMENT PAID _____

OTHER _____

INITIAL DATE

WASTEWATER/STORM

PRETREATMENT COMPLIANCE _____

STORMWATER BMP _____

STORMWATER IMPERVIOUS AREA CALC _____

STORMWATER UTILITY CALCS COMPLETED _____

INITIAL DATE

SITE PLAN APPROVAL ISSUED ON _____ 20_____ BY _____
Planning Director

Distribution of Approved Permit & Plans: Engineering Inspector