



# City of Cuyahoga Falls

## Division of Planning & Zoning

2310 Second Street  
Cuyahoga Falls, OH 44221  
330-971-8135

Application Number (office use): \_\_\_\_\_

Application Date (office use): \_\_\_\_\_

Parcel # \_\_\_\_\_ Planning Area: \_\_\_\_\_ Zoning Code: \_\_\_\_\_

### \$25.00 -- Zoning Certificate Application/Interior Construction

#### 1. Applicant Information (Contact Information)

Owner Name / Contact: \_\_\_\_\_ Phone No. \_\_\_\_\_

Contractor Street Address: \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Other City, State Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

#### 2. Project Information

Property/Site Address: \_\_\_\_\_

Commercial  Residential Construction Cost: \_\_\_\_\_ (required)

Project Description: \_\_\_\_\_

**\* ATTACH COMPLETE DESCRIPTION, SITE PLAN, ELEVATION AND CONSTRUCTION DRAWINGS.**

#### 3. Applicant Certification

I/we hereby agree to conform to the City of Cuyahoga Falls General Development Code. I also hereby certify that all statements made on this application are true and complete and that I have a legal right to make this application or to possess a written power of attorney on above premises.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

#### 4. Office Use

Approved (requires stamp)  Denied (state reasons)

Cash  
 Check Check #: \_\_\_\_\_  
 MC/Visa/Discover

Final Inspection Approval Date: \_\_\_\_\_

By: \_\_\_\_\_

Comments:

Email completed documents to: [Development@cityofcf.com](mailto:Development@cityofcf.com)