Troy Development Department
www.troyohio.gov
937.339.9481

ACCESSORY ZONING PERMIT APPLICATION

(FOR SHEDS, GARAGES, DECKS, POOLS, ETC.)

Address of Project: _____

Type of Structure/Use: ☐ Shed ☐ Garage ☐ Deck ☐ Pool ☐ Other_____

Applicant/Contractor Name: _____

Address: _____

Phone: _____ Email: _____

Property Owner Name: _____

Address: _____

Phone: _____Email: _____

Sq. Ft. of Proposed Project:_____ Height/Stories of Project: _____

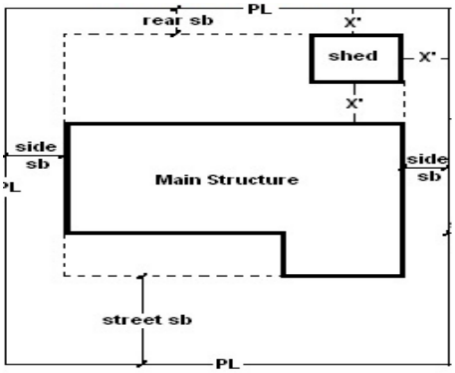
Distance from Rear Property Line: _____ Distance from Side Property Line: _____

Distance from Principal Structure: _____

Number of Accessory Buildings on Site: _____ Total Project Area (sq.ft.): _____

Each application must have a site plan showing the location of the project, or picture indicating accurate relevant dimensions. All permits are issued to the applicant, unless otherwise specified. Please contact the Miami County Building Department (937-440-8121) for additional permits required.

***Processing time:7-10 Business Days**



By signing this application, I acknowledge I am authorized by the owner to make this application. The information presented is accurate. I agree to allow City of Troy employees to enter the property in order to complete necessary inspections. I agree to conform to all applicable laws of the City. The City of Troy does not enforce covenants and restrictions.

Signature: _____ Date: _____

Site Plan with Setbacks -☐ Signed Application -☐ Fee: $25 Residential- ☐
$50 Commercial/Industrial- ☐