

# Planning & Zoning Permit Application

Mayfield Village Building Dept  
6622 Wilson Mills Rd  
Mayfield Village, Oh 44143  
Ph: 440.461.2213 Fax: 440.442.5077

**Application Date:** \_\_\_\_\_

**Meeting Date:** \_\_\_\_\_

**P & Z Application Fee: \$50 + 3% State Fee:** \_\_\_\_\_

Pursuant to the Village of Mayfield Charter and Zoning Code, the undersigned hereby submits attached information and requests a hearing before the Planning & Zoning Commission for the following purposes:

(Please Check Request)     **SITE PLAN APPROVAL**                       **LOT SPLIT/CONSOLIDATION PLAT**  
  
 **OTHER** \_\_\_\_\_

**Owner**

**Representative at Hearing  
(if different than Owner)**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Ph: \_\_\_\_\_ Fax: \_\_\_\_\_

Ph: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

Nature of Request	Code Section	Description
1.		
2.		
3.		

NOTE: A narrative is required with the application.

Applicant's Signature: \_\_\_\_\_

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

Property Owner's Signature: \_\_\_\_\_

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