

CITY OF EASTLAKE
BUILDING DEPARTMENT
35150 LAKESHORE BLVD., EASTLAKE, OHIO 44095
Ph. No. 440-951-2200 Ext 1004
Email: buildingdept@eastlakeohio.com
FAX: 440-975-4280

PLANNING COMMISSION APPLICATION

DATE: _____

APPLICATION NO. _____

FEE: \$180.00

| | | |
|---|--------------|-------------------|
| FOR OFFICE USE ONLY: | | |
| Date: _____ | Zoned: _____ | Authorized: _____ |
| Activity requiring Conditional Use Permit: _____ | | |
| Action taken: _____ | | |

BUSINESS NAME: _____

Print

INDICATE: LLC: _____ CORPORATION: _____ SOLE PROPRIETORSHIP: _____

NAME: _____

Print: Owner or Manager

BUSINESS ADDRESS: _____

(Residency or Commercial) Street City, State, Zip

MAILING ADDRESS (if different than business address):

Street

City, State, Zip

PHONE NO: _____

EMAIL: _____

DESCRIPTION OF WORK:

DIVISION OF PROPERTY: _____ REZONING: _____ YARD APPROVAL: _____

NEW DEVELOPMENT: _____ NEW BUSINESS: _____ OTHER: _____ ZONING: _____

CONDITIONAL USE PERMIT (PLEASE EXPLAIN) _____

ADDITIONAL INFORMATION:

Signature: _____

Owner

Date: _____

Revised 5/2022

