

CITY OF EASTLAKE OHIO  
35150 LAKESHORE BLVD  
EASTLAKE, OHIO 44095

440-951-1416 EXT. 117 FAX: 440-975-4280

## PLANNING COMMISSION APPLICATION

DATE \_\_\_\_\_

**APPLICATION FEE: \$180.00**

**APPLICATION NUMBER** \_\_\_\_\_

FULL NAME OF OWNER(S) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

<b>LOCATION OF PROPERTY/DESCRIPTION OF WORK</b>
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FULL NAME OF BUSINESS \_\_\_\_\_

PLEASE CHECK ONE    LLC \_\_\_\_\_ CORPORATION \_\_\_\_\_ SOLE PROPRIETORSHIP \_\_\_\_\_

LOCATION OF PROPERTY \_\_\_\_\_

CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

\_\_\_\_\_ DIVISION OF PROPERTY                  \_\_\_\_\_ REZONING                  \_\_\_\_\_ YARD APPROVAL

\_\_\_\_\_ CONDITIONAL USE PERMIT                  \_\_\_\_\_ NEW DEVELOPMENT                  \_\_\_\_\_ NEW BUSINESS

OTHER \_\_\_\_\_

IF ADDITIONAL NOTIFICATION REQUESTED – MAIL TO:

\_\_\_\_\_  
\_\_\_\_\_

### FOR OFFICE USE ONLY

ZONED \_\_\_\_\_ VERIFIED \_\_\_\_\_

**ACTION  
TAKEN** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_