

APPLICATION NO.

CITY OF PICKERINGTON BUILDING DEPARTMENT

100 LOCKVILLE ROAD PICKERINGTON, OH 43147 (614) 837-3974, FAX (614) 833-2201

website address: http://www.pickerington.net

office use

This form must be submitted to the Building Department and approved prior to the issuance of a building permit. The applicant must complete the first section of this form and attach a copy of the building permit application and the impact fee calculation form (Form B). The Building Department will verify the information provided and forward the request for exemption to the City Council for final action, pursuant to the terms of Chapter 1486, Pickerington Codified Ordinances.

This form is not required for the following exemptions, but may be requested by the applicant: a net increase in non-residential floor area, remodeling or improvements, replacements, temporary uses, governmental use, and no increase in demand for public facilities. The following exemptions must be approved by the City Attorney as to form: development agreements, and settlement agreement. This form is required if exemptions are claimed for economic development.

Note: In the event of an inconsistency between this form and the Codified Ordinances, the provisions of the Codified Ordinances govern.

Part 1 - to be completed by Applicant

(Attach separate sheets as necessary)

1. Project Information	ZONE DISTRICT	AUDITOR'S PARCEL NO.	LOT NO.	CASH	CHECK #	Date:

2.	Subdivision
Pr	oject Development
N۶	ame

3. Applicant / Owner Information: ↓	Street Address / City / State / Zip ↓	Phone Number ↓
Property Owner - Who owns the land		
Architect / Engineer /Surveyor/ Contractor - Plans by		
Applicant - Who is handling the permits		

4.	Building Permit Application(s)		
	of building permit application(s): ng permit application number(s):		
5.	Amount of impact fees due and amount of	of requested exempti	on:
	Facility	Amount Due (Form 'B')	Requested Exemption
Parks	s & Recreation Facilities impact fee:	\$	\$
Police	e Facilities impact fee:		
Gove	rnment Facilities impact fee:	\$	\$
Stree	t impact fee:	\$	\$
TOTA	AL:	\$	\$
6.	Reason for exemption request:		
	Pursuant to the terms of Chapter 1486, development qualifies as:	Pickerington Codifie	ed Ordinances, the proposed
	No net increase in non-residenti Remodeling or improvements Replacements Temporary uses Development agreements Governmental use No increase in demand for publi Settlement agreement Economic Development		
7.	On a separate sheet, explain in detail the basis for the requested exemption pursuant to the provisions of chapter 1486, Pickerington Codified Ordinances.		
8.	3. All information submitted by applicant is true and correct:		
Applic	eant's Signature	Da	ate
Applic	cant's Printed Name		
	DO NOT WRITE BELOV	V THIS LINE (office	use)
9.	Form "I" received on:		
10.	Building Department verification of info	rmation provided by	the applicant:
	Name		ate

application is exempt will be made by the Bui residential floor area; remodeling or impro	
development agreements; governmental use; settlement agreement.	no increase in demand for public facilit
Exemption from impact fees: \Box Approved	□ Denied
Building Department Representative	Date
Printed Name	-
If the exemption is requested for any of tapplication is exempt will be made by the Battorney for legal sufficiency: development agr	uilding Inspector after review by the
City Attorney has reviewed and approved as tall supporting documentation.	o form and legal sufficiency the appeal
☐ Yes ☐ No - explain:	
•	
City Attorney's Signature	 Date
	Date
Printed Name	-
Printed Name Exemption from impact fees: Approved	- □ Denied
	-
Exemption from impact fees: \Box Approved	□ Denied
Exemption from impact fees:	□ Denied Date
Exemption from impact fees:	☐ Denied ☐ Date ☐ Date ☐ development, the exemption must
Exemption from impact fees:	Date Date development, the exemption must

Exemption approved		
Resolution or minutes of city council evidencin support thereof attached?	g council action and	d written findings in
Yes.		
No. If No, please explain basis and reaso	ons for decision.	
TC 1		
If approved:		
(a) Amount of impact fee due and amount of	f exemption granted	:
Facility	Amount Due	Amount Exempted
Parks & Recreation Facilities impact fee:	\$	\$
Police Facilities impact fee:		
Government Facilities impact fee:	\$	\$
Street impact fee:	\$	\$
TOTAL FEES:	\$	\$
	'	'
[Note: enter these amounts in Table 2 of Form "I	B"]	
(b) Identify source of funds to be transferred in lieu of exempted impact fees.	l into the appropria	te impact fee account
Maria	Data	
Mayor	Date	
Printed Name		

After final action by the City Council, a completed copy of this form will be transmitted to the Building Inspector and City Manager for appropriate action.

IF AN EXEMPTION IS APPROVED, THE FO COMPLETED BY THI	
PURSUANT TO THE ABOVE DIRECTIVE FEE FUNDS, EQUAL IN AMOUNT TO THE TRANSFERRED.	
City Manager	_
Date	