**AUGLAIZE COUNTY NEIL ARMSTRONG AIRPORT**

**Zoning Permit Application Instructions**

1. An original and one (l) copy of the following shall be submitted to the Zoning   
   Inspector at the address listed below:
2. A letter that outlines the proposed construction project;

B. A copy of FAA form 7460-1 (if applicable);

1. A copy of FAA Airspace Determination (if applicable);
2. A copy of a permit issued pursuant to the Ohio Tall Structures Act (if   
   applicable);
3. Specific information about the location, latitude and longitude, elevation, height,   
   and top elevation of the proposed construction.
4. The applicant shall include with the permit application package a check or money order   
   in the amount set in the Airport Zoning Fee Schedule and payable to the Auglaize County Auditor. This application fee is non-refundable.
5. The Zoning Inspector will either approve or deny the zoning permit within 15 days   
   of receipt of all required materials and fees.
6. In the event of a zoning permit denial, the applicant shall have 21 days to appeal the   
   decision of the Zoning Inspector to the Zoning Board of Appeals from the date of Zoning Inspector denial.

**NOTE:** *It is the applicant's responsibility to obtain any required FAA or State of Ohio or   
local government approvals prior to construction. Copies of Federal, State, or local permit   
applications will not routinely be forwarded by the Airport to other offices.*

ZONING INSPECTOR: Randy Kuck

Auglaize County Commissioners

07166 Moulton Angle Rd

New Knoxville, OH 45871

419.753.2766

**APPLICATION FOR PERMIT TO ERECT A STRUCTURE**

**Auglaize County Neil Armstrong Airport – Auglaize/Shelby County Zoning Commission**

***Internal Use Only***FAA Case Number: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

**Sections 1-6 to be completed by Applicant**

Failure to provide complete information may result in a delay of review or denial of a permit. If an FAA Form 7460-1, *Notice of Proposed Construction or Alteration,* has been submitted for review, include a copy of application and/or response letter from FAA with this application along with any other supporting documentation.

1. **Contact Information**

|  |  |
| --- | --- |
| **Applicant Information** | **Engineer/Architect Information** |
| Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| City, State, Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | City, State, Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. **Structure Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Construction:** |  | **Elevations:** |  |
| \_\_\_\_\_\_ New Construction | \_\_\_\_\_\_Alteration | Ground Elevation | **\_\_\_\_\_\_\_\_\_\_\_\_\_**(MSL) |
| \_\_\_\_\_\_ Permanent | \_\_\_\_\_\_Temporary | Height of Structure + | **\_\_\_\_\_\_\_\_\_\_\_\_\_**(AGL) |
|  |  | Top Elevation = | **\_\_\_\_\_\_\_\_\_\_\_\_\_**(MSL) |

Description and Use of Structure (Dimensions, type of construction, purpose, etc):

1. **Site Information**

|  |  |
| --- | --- |
| Site Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Township:\_\_\_\_\_\_\_\_\_\_\_\_\_Section:\_\_\_\_\_\_\_\_\_\_\_\_ |
| City, State, Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Nearest Road Intersection:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |

1. **Drawing Information**

Request will not be considered without an engineered drawing/plan set which illustrates the following:

|  |  |
| --- | --- |
| \_\_\_\_\_\_Drawing identification (file name or #)and date | \_\_\_\_\_\_Engineers Seal |
| \_\_\_\_\_\_Scale | \_\_\_\_\_\_Contact Information |
| \_\_\_\_\_\_Site Map | \_\_\_\_\_\_Profile View of Structure |
|  | \_\_\_\_\_\_Latitude and Longitude |

1. **Remarks**
2. **Certification**

I hereby certify that all statements on this application are true and correct.

|  |  |
| --- | --- |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name and Title of person filing notice:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**FOR INTERNAL USE ONLY**

Auglaize County Neil Armstrong Airport- Auglaize/Shelby County Zoning Commission Inspector Review

|  |  |
| --- | --- |
| **Elevation Information** | Ground Elevation at Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Height of Structure: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Top Elevation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Allowable Elevation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| **FAA Form 7460-1** | Form Required: \_\_\_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No |
|  | Date Submitted to FAA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Date of FAA Response: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Response from FAA: \_\_\_\_\_Approved \_\_\_\_\_\_Denied |
|  | FAA Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| **Permit** | Permit Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Permit Denied: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |
| --- | --- |
| **Permit** | Application Fee Received: \_\_\_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_No |
|  | Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Comments:**



**Airport Zoning Fee Schedule**

**Zoning Application 160.00**

**Variance Request 165.00**

**Amendment to Zoning**

**Regulations or Map 500.00**

**Copy of Zoning Regulations 10.00**

**\*Zoning Applications include a copy of the Zoning Regulations**