

## **PROCEDURE FOR CONSTRUCTING A FENCE**

All fences, regardless of size, require a Zoning Permit. (NO Building Permit Needed)

1. Complete the application and submit it to the **Zoning Department** along with:
  - a. Site plan of your property showing property lines and dimensions and the location of the proposed fencing. Either the property owner or the contractor can submit the application.
  - b. \$50.00 fee will be required at the time the application is submitted.
2. Applicant must mark the proposed fence location on the property. **IT IS THE RESPONSIBILITY OF THE PROPERTY OWNER TO ENSURE THAT THE FENCE IS ERECTED ON THEIR OWN PROPERTY.**
3. The Zoning Department will conduct an inspection of the property. If the inspection is completed satisfactorily, your permit will be issued and mailed to the person submitting the application.
4. **If you have questions or need assistance, please call the Zoning Department at (330) 877-9222.**

**Please note that the Village Office hours are as follows: Monday – Friday 8:00 a.m. to 4:30 p.m. with the exception of Thursdays 8:00 a.m. – Noon.**

## **FENCE RULES/REGULATIONS**

1. Fences should be structurally adequate and constructed on your property (up to the lot line - preferably 18" to 24" from property line). No fence shall extend further than 15' from the corner of the lot.
2. Fences shall not exceed six (6) feet in height in the rear yard and four (4) feet in height in the side yard. Fences shall not exceed eight (8) feet in height in the M-1 District or where approved by the Planning Commission for screening purposes in other districts. Fences along the front edge of any front yard, may be constructed to a maximum height of four (4) feet.

**VILLAGE OF HARTVILLE, OHIO  
ZONING DEPARTMENT  
APPLICATION FOR  
ZONING PERMIT**

Zoning permit No. \_\_\_\_\_

Date Issued \_\_\_\_\_

**SANITARY DISCHARGE APPROVAL  
BY BOARD OF PUBLIC AFFAIRS**

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

A scale plan must be submitted with this application showing the size and location of the Lot, the dimensions and location of the proposed building or structure on the lot and the dimensions and location of existing buildings or structures on the lot.

Name of Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Owner of Premises \_\_\_\_\_ Address \_\_\_\_\_

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

Application is hereby made to: (Description of Work) \_\_\_\_\_

To be used for (Indicate purpose, number of units or offices, etc.) \_\_\_\_\_

On premises located at \_\_\_\_\_

**DESCRIPTION**

(1) Size of lot: \_\_\_\_\_ feet wide \_\_\_\_\_ feet deep

(2) Size of building or structure: Floor area \_\_\_\_\_  
Maximum: Width \_\_\_\_\_ ft. Depth \_\_\_\_\_ ft.  
Height: Stories: \_\_\_\_\_; feet \_\_\_\_\_

(3) Location on Property:

**Proposed Yards**

FRONT	_____	ft. from Property Line to Building or Structure.
SIDE	_____	ft. from Property Line to Building or Structure.
SIDE	_____	ft. from Property Line to Building or Structure.
REAR	_____	ft. from Property Line to Building or Structure.

(4) Character of Construction \_\_\_\_\_  
(Brick, Frame)

(5) Estimated Cost of Work \$ \_\_\_\_\_

(6) Present use of Land, Existing Buildings or Structures on Lot: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

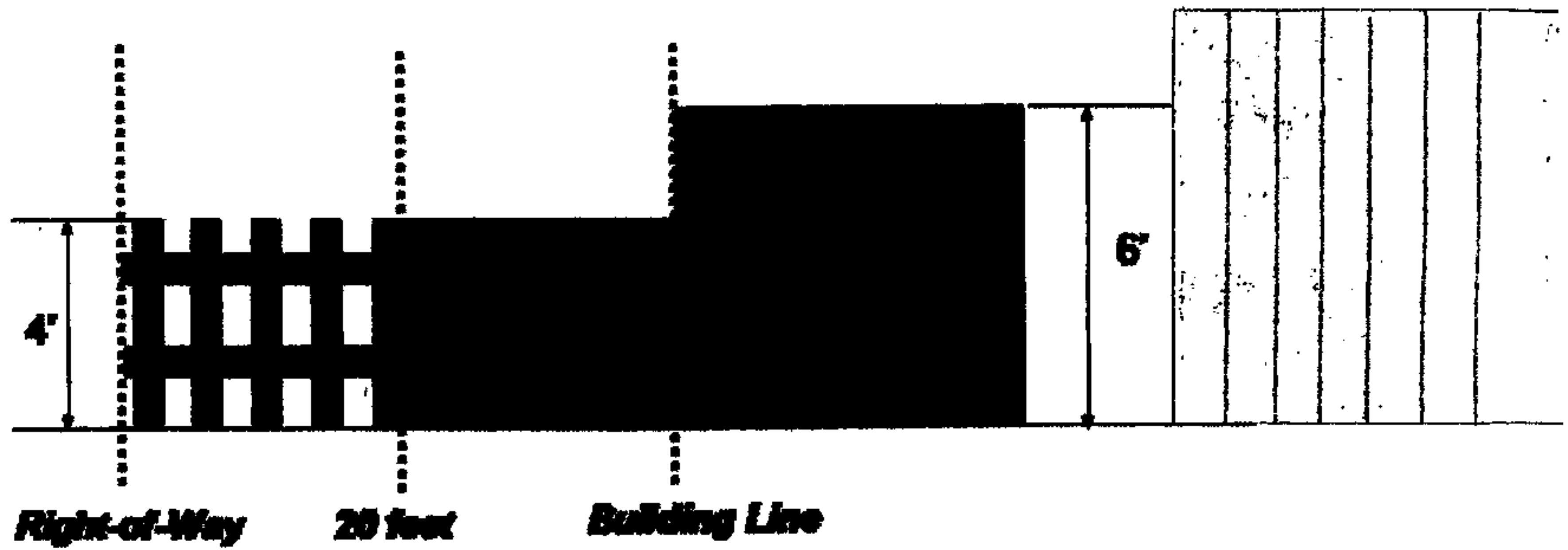
Please note any additional information on separate sheet and attach to this form.

**CERTIFICATION OF ZONING INSPECTOR'S EXAMINATION**

I have examined the foregoing application, plans and information, found them not / to conform with the zoning requirements and grant / refuse them a Zoning Permit.

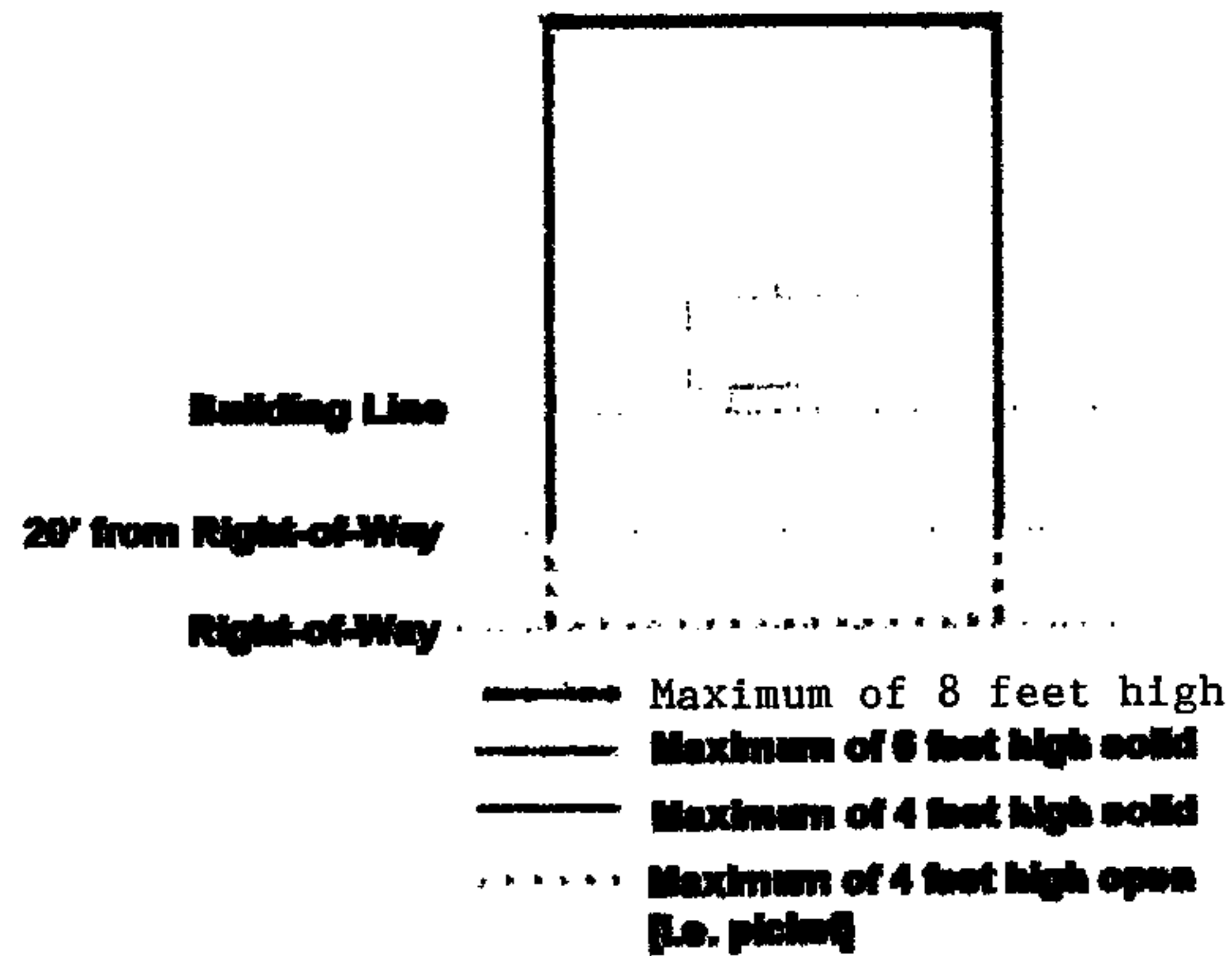
By \_\_\_\_\_ Date \_\_\_\_\_

**Fig. 1**  
**Fences In Front Yards [Side View]**

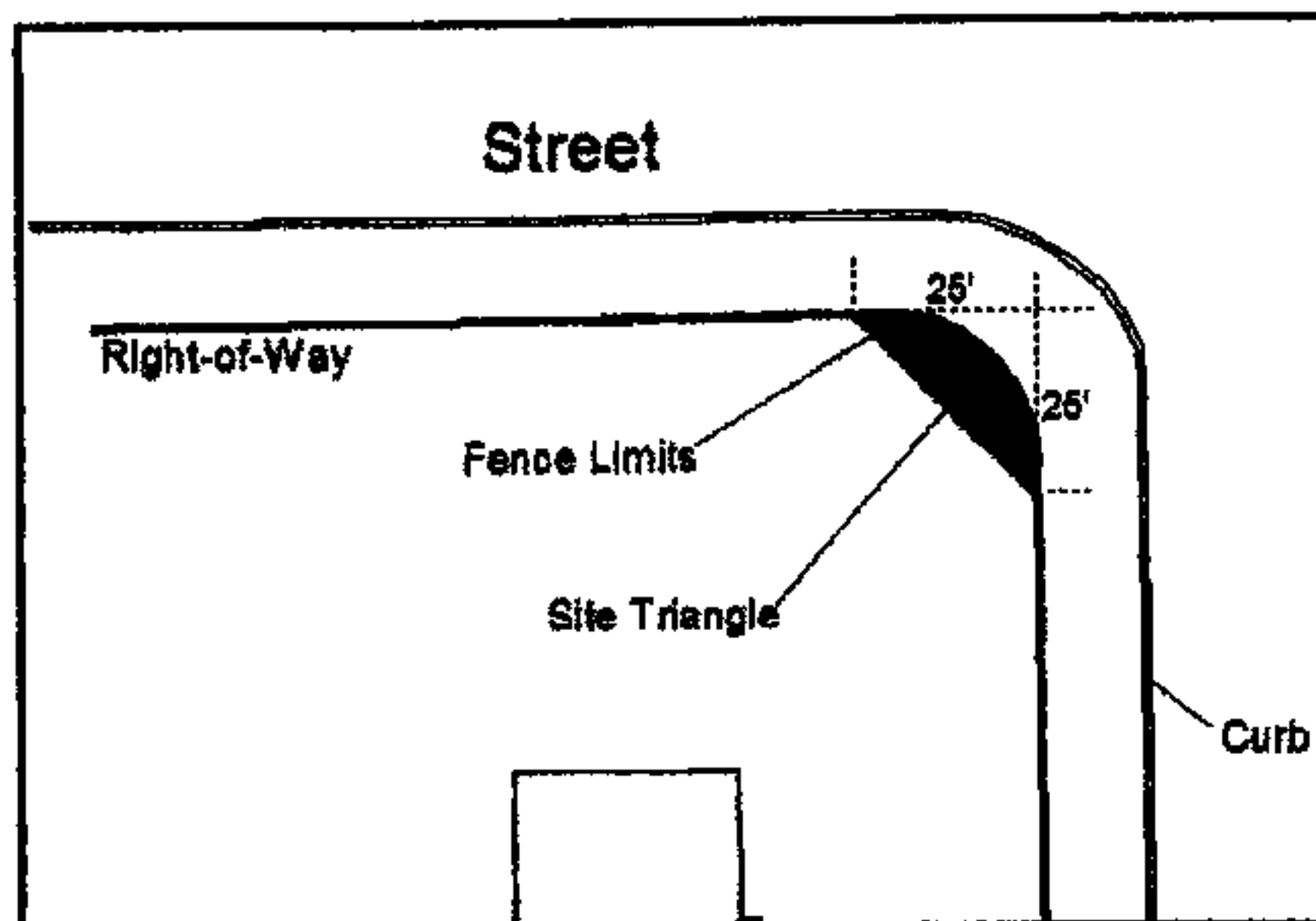


**PERMITTED LOCATION OF FENCES BY TYPE**

**Fig. 2**  
**Fences in Front Yards**  
**[Plan View]**



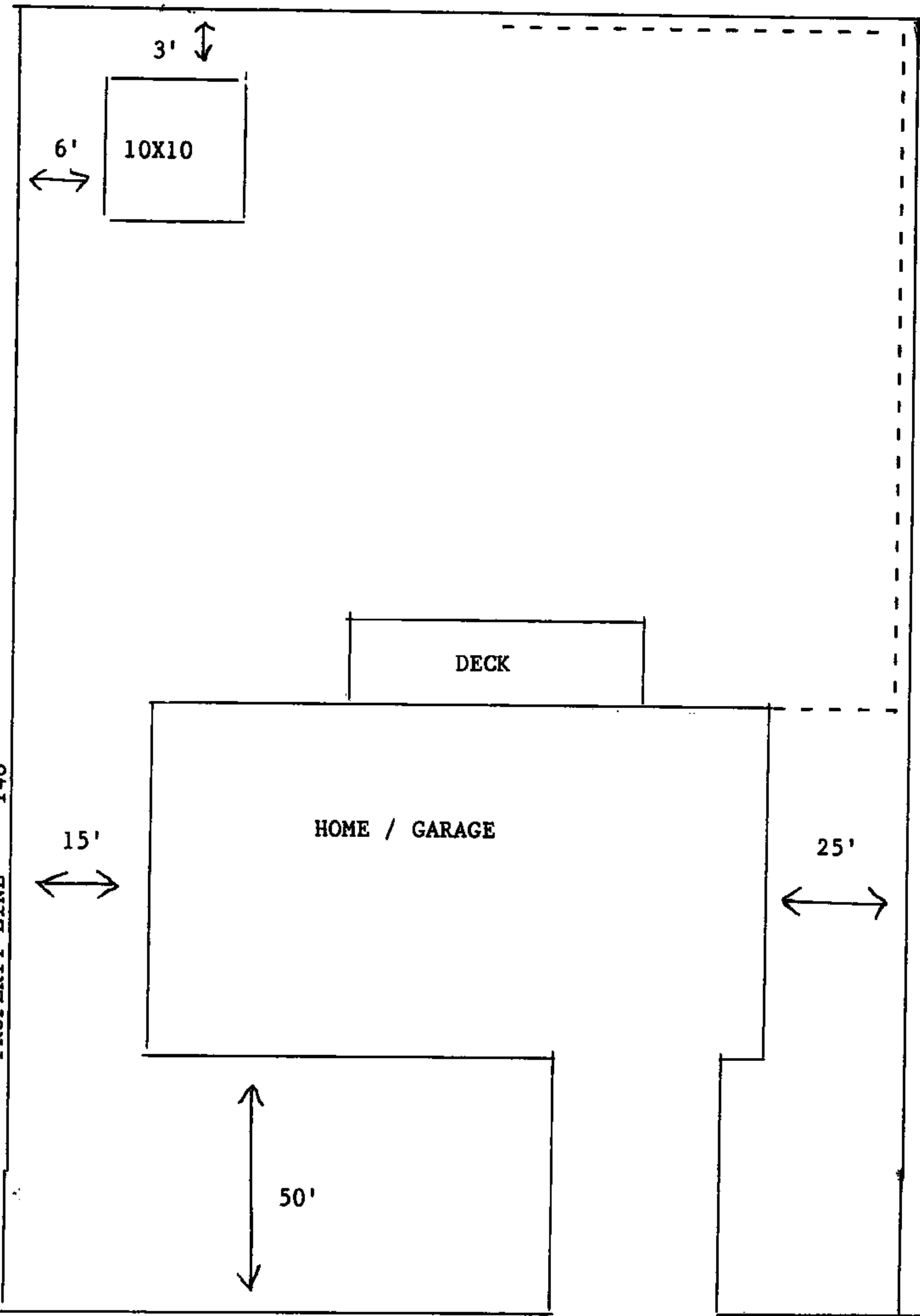
**Fig. 3**  
**Fences on Corner Lots**  
Fences must not be located in "site triangle"



**SAMPLE SITE PLAN**

(- - - - - FENCE)

PROPERTY LINE 80'



NAME OF STREET

**Contractor/Subcontractor Registration Application:**

All contractors/subcontractors must submit an application for contractor registration.

Initial Application: \$75.00

Annual Renewal: \$50.00 (if registered the previous year)

The following must be returned with the application for approval: Certificate of Liability (\$1,000,000.00) listing the Village of Hartville as the Certificate Holder, along with the Surety Bond (\$10,000.00).

All paperwork will be submitted to the: Village of Hartville  
202 W. Maple Street  
Hartville, Ohio 44632

\*\*\*Please note, the Village of Hartville will no longer mail out a copy of the license. If you would like to receive a copy, please provide a self-addressed stamped envelope along with your application.

Office hours are Monday, Tuesday, Wednesday, and Fridays 8 a.m. to 5:00 p.m. with the exceptions of Thursday, the office is opened from 8 a.m. to Noon.

VILLAGE OF HARTVILLE  
202 W. MAPLE STREET, P.O. BOX 760  
HARTVILLE, OH 44632  
330-877-9222 FAX 330-877-9778  
[www.hartvilleoh.com](http://www.hartvilleoh.com)

**CONTRACTOR/SUBCONTRACTOR REGISTRATION APPLICATION**

Date \_\_\_\_\_

☐ New Registration (\$75.00)      ☐ Renewal (\$50.00 - if registered the previous year)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Company Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

FED ID or SSN \_\_\_\_\_ Email \_\_\_\_\_

TYPE OF REGISTRATION:

☐ **General** - Please circle (Excavation, Foundation, Masonry, Insulation, Roofing, Drywall, Siding, Landscaping, Painting, Carpentry, Other \_\_\_\_\_)      ☐ HVAC      ☐ Electrical      ☐ Sewer

**Address of Project location:** \_\_\_\_\_

INSURANCE INFORMATION:

Insurance Company & Agent \_\_\_\_\_

Insurance Co. Address \_\_\_\_\_ Phone \_\_\_\_\_

Expiration Date of Policy \_\_\_\_\_

**Note: A current copy of Liability Insurance (\$1,000,000) naming the Village of Hartville as certificate holder, Surety Bond (\$10,000), and State License, (if applicable), must be submitted and kept on file in the Building Department of the Village of Hartville, or registration is void.**

Do you have subcontractors? ☐ Yes      ☐ No      (If yes, each subcontractor must complete a **Contractor Registration Form.**)

Will your company be withholding local income tax from all employees on the job? ☐ Yes      ☐ No  
(All Businesses are required to submit copies of IRS Forms 1099-MISC to Hartville Income Tax Department within 3 ½ months after the end of the tax year.)

Please list your subcontractor information on the following page.

The Village of Hartville is an equal opportunity provider.

**Village of Hartville Income Tax Department**  
**202 W Maple St      PO Box 760      Hartville OH 44632**  
**Phone: 330-877-9222      Fax: 330-877-9778**

**CONTRACTOR LISTING**

<b>TYPE</b>	<b>SUBCONTRACTOR</b>	<b>FULL ADDRESS</b>	<b>PHONE #</b>
<b>EXCAVATION</b>			
<b>FOUNDATION</b>			
<b>MASONRY</b>			
<b>STRUCTURAL CARPENTRY</b>			
<b>ELECTRICAL</b>			
<b>PLUMBING</b>			
<b>HVAC</b>			
<b>INSULATION</b>			
<b>ROOFING</b>			
<b>DRYWALL</b>			
<b>FINISHING CARPENTRY</b>			
<b>SIDING</b>			
<b>LANDSCAPING</b>			
<b>PAINTING</b>			
<b>OTHER</b>			



# Village of Hartville

202 W Maple St PO

Box 760

Hartville, OH 44632

Phone 330-877-9222 Fax 330-877-9778

aphillips@hartvilleoh.com

## Income Tax Department

### Business Registration

To enable the Village of Hartville Income Tax Department to establish accurate records, please answer all questions and return by mail, fax or email.

ACCT # \_\_\_\_\_

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

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

Date Business Started in Hartville: \_\_\_\_\_ Phone #: \_\_\_\_\_

Tax ID/S.S. #: \_\_\_\_\_ Accounting period: \_\_\_\_\_ Calendar Year \_\_\_\_\_ Fiscal Year Ending \_\_\_\_\_

Please check one: \_\_\_\_\_ annual year-end filing forms are not necessary  
\_\_\_\_\_ send pre-printed annual year-end filing forms to: \_\_\_\_\_

### EMPLOYEE WITHHOLDING (if applicable)

Employee Withholding is submitted: Monthly \_\_\_\_\_ Quarterly \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Please check one: \_\_\_\_\_ pre-printed withholding forms are not necessary, use in-house software system  
\_\_\_\_\_ use third party Payroll Company - Name: \_\_\_\_\_  
\_\_\_\_\_ send pre-printed withholding forms to: \_\_\_\_\_

\_\_\_\_\_ Check here: If this is withholding for a Hartville resident working from home. FT \_\_\_\_\_ Hybrid \_\_\_\_\_  
If Hybrid, how many days in Hartville per week \_\_\_\_\_

Employee Name: \_\_\_\_\_ Contact phone or email \_\_\_\_\_  
Address: \_\_\_\_\_

The Village of Hartville imposes an income tax at the rate of one percent (1%) on all earned income, including net profits attributable to Hartville. All employers, contractors, sub-contractors, or others who have one or more employees are required to withhold 1% of all employees' gross wages and submit this amount to the Village of Hartville.

The information hereby submitted is true and correct

Signed \_\_\_\_\_ Date \_\_\_\_\_