

CITY OF MONTGOMERY
APPLICATION FOR RESUBMITTALS

FOR INFORMATION CALL: 1-888-433-4642

(CHECK ONE) RESIDENTIAL: _____ COMMERCIAL: _____

APPLICATION DATE: _____

SITE ADDRESS: _____ SUITE# _____

TENANT'S NAME (Commercial Properties) _____

PROJECT DESCRIPTION: (SEE BELOW) _____

PROPERTY OWNER _____

CHECK PERMIT TYPES REQUESTED: *(Check all that apply)*

_____ **CORRECTIONS / ADD'L INFO** REQUESTED FOR PLANS UNDER REVIEW

_____ **REVISIONS** TO APPROVED PLANS FOR PERMIT # _____

PLEASE SUBMIT PLANS AND APPLICATION ELECTRONICALLY, IF POSSIBLE, TO
communitydevelopment@montgomeryohio.gov

APPLICANT'S NAME (PLEASE PRINT): _____

EMAIL ADDRESS _____

PHONE: _____ FAX _____

APPLICANT'S SIGNATURE: _____ DATE: _____

***** OFFICE USE ONLY *****

DEPOSIT \$ _____ RECEIVED BY _____ REFERENCE _____

APPROVED / NOT APPROVED _____ DATE: _____ ZONING: _____ DATE: _____