

CLINTON COUNTY ZONING DEPARTMENT

850 Fairfax St., Carlyle, IL 62231

Phone: (618) 594-6655

Fax: (618) 594-6006

jami.staser@clintonco.illinois.gov or kay.thole@clintonco.illinois.gov

Residential Application

Office Use Only:

Date: _____
Zoning Application No.: _____ Home: _____ Accessory: _____ Gov Pay /Check
Permanent Parcel No.: _____ Late: _____ Total Fee: _____ Gov Pay /Check
Zoning Classification: _____ ATF – Var. – Special Use – Map Change – Month: _____

Applicants Current Information

Full Name: _____ Address: _____
First Last (Street) (City)

Phone #: _____ Email: _____

Parcel No. _____ Township: _____

Location information of property in question (If different from above)

Full Name: _____ Address: _____

Parcel # _____ Township _____ Subdivision: _____

COMPLETE THIS SECTION ONLY FOR COMMERCIAL OR INDUSTRIAL USE

COMMERCIAL: Description of proposed work	INDUSTRIAL: Description of proposed work

All applicants must complete (What work will be completed)

Single Family Dwelling – (Basement -Finished- Unfinished, Walkout, Crawl, Slab) - Deck – Covered Patio – Porch Addition to existing Residence on (Crawl, Slab, Basement) Enclosed Sunroom Multi Family Dwelling – Duplex Manufactured OR Modular Home- (Single or Double – Block Foundation) – Deck – Covered Patio – Porch Swimming Pool (Above or In-ground) Carport - Lean To – Clubhouse – Pavilion - Gazebo Garage – Shed- Pole bldg.. (Portable or Detached) Any Bathrooms Yes/No Storage Container- Truck Trailer

Size: _____ Total Sq. Ft: _____ Height: _____ Cost of structure: \$ _____
Height of basement/crawl space walls: _____

Size: _____ Total Sq. Ft: _____ Height: _____ Cost of structure: \$ _____

UTILITIES: () Public Sewers () Clinton County Health Permit # _____

POOL: Plans on installing a fence (Yes) (No). Time line on installing the fence. _____ Contractor _____

If a Licensed Private Sewage Installer Contractor is needed, have you contacted the Health Department?
() Yes () No - Date contacted _____

() **EXISTING DWELLING WILL BE REMOVED UPON OCCUPANCY OF NEW DWELLING (if applicable)**

Month: _____ Year: _____ Signature: _____

PRESENT USE OF PROPERTY: (PLEASE CIRCLE)

Single Family – Duplex – Multi-Family – Vacant Tract – Agriculture _____
Commercial (type) _____ Industrial (type) _____

PROPOSED USE OF PROPERTY (PLEASE CIRCLE)

Single Family – Duplex – Multi-Family – Vacant Tract – Agriculture _____
Commercial (type) _____ Industrial (type) _____

THIS MUST BE ANSWERED (Please Circle)

Is any part of the tract of land in the floodplain based on the Flood Hazard Boundary Map? Yes or No

Is any part of the land in the Carlyle Lake Flowage Easement? Yes or No

Is any part of the land in the Enterprise Zone? Yes or No

Is there an address assigned to this property? Yes or No

If you have a solar panel, did you fill out the PTax-330 form? Yes or No

(If you answered yes to the above, more information will be needed before issuing a building permit.)

SITE PLAN INFORMATION

**Any deviation, or actual distance, differing from this application does not conform with Clinton County Code-
May result in fines & penalties, a "STOP ORDER" & correction action as outlined in 40-8-6 & 40-8-10**

Your site plan should consist of the following:

- Property lines & dimensions of lot
- Distances from proposed structure, front, side and rear lot lines
- Center of County or Township Road to proposed structures.
- Building Height – (from the ground to the peak)
- Distance from Right-of-Way line from State Highway to proposed structure
- **NEW HOMES:** Please furnish an 8 x 11 copy of the floor plan with dimension of the house and garage.
- **Solar Panels-** Please show lateral fields on application.

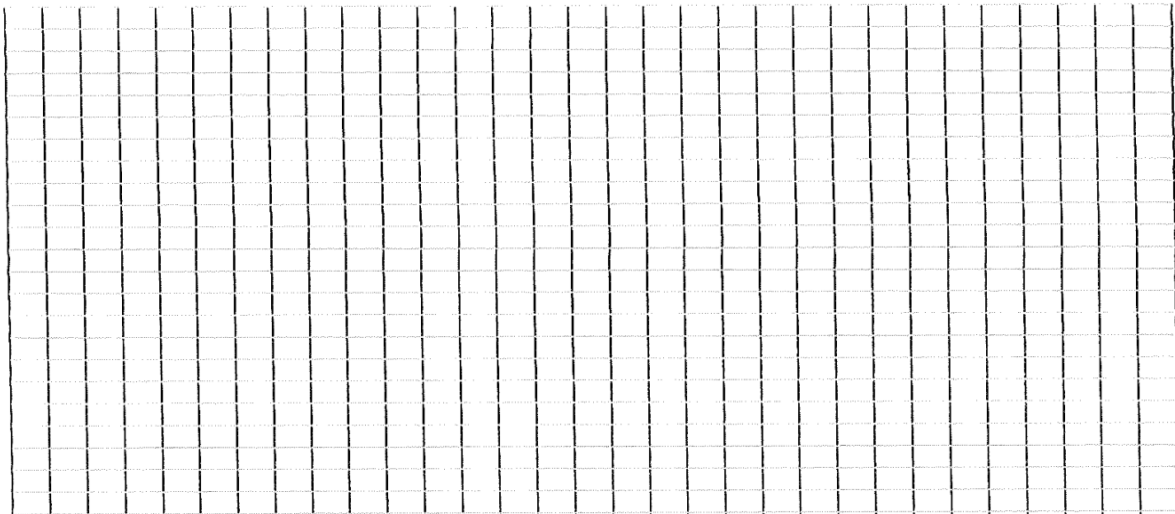
THE OWNER IS RESPONSIBLE FOR DETERMINING THE ACCURATE LOCATION OF PROPERTY LINES

(Consult a licensed land surveyor to confirm property lines if you are unable to do so, our office is unable to provide this information)

PROVIDE A DRAWING BELOW OR ATTACH TO YOUR APPLICATION

Fill free to use the GIS mapping @ <http://portico.mygisonline.com/html5/?viewer=clintonil.bv1-p1>, Google Earth or gram below for drawing your new structure.

Please provide all setbacks on your drawing: Front – Rear – Side – Centerline of road to structure.



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MUST READ

Applicants are encouraged to visit, call or e-mail jami.staser@clintonco.illinois.gov or (kay.thole@clintonco.illinois.gov) for any assistance needed in completing this form or visit the Website: <https://www.clintonco.illinois.gov/county-offices/zoning/> Application is hereby made for a Certificate of Zoning Compliance, as required under the ZONING ORDINANCE OF CLINTON COUNTY, for the erection, moving or alteration, and use of buildings and premises. In making this application the applicant represents all of the above statements and any attached maps and drawings to be a true description of the proposed new or altered uses and/or buildings. The applicant agrees that the permit issued may be revoked without notice on any breach of representation or conditions. It is understood that any permit issued on this application will not grant right of privilege to erect any structure or to use any premises described for any purpose or in any manner prohibited by the ZONING ORDINANCE, or by other ORDINANCES, CODES, or REGULATIONS of CLINTON COUNTY, ILLINOIS.

PENALTIES

40-8-10 PENALTIES.

(A) Any person who is convicted of a violation of this Code shall be guilty of a Class B misdemeanor and shall be fined not less than **Seventy-Five Dollars (\$75.00)**, nor more than **One Thousand Dollars (\$1,000.00)**, plus costs. Each day on which a violation continues shall be considered a separate offense.

(B) Nothing contained in this Section shall prevent the County from taking any other lawful action that may be necessary to secure compliance with this Code. **(Ord. No. 2015-05)**

Disclaimer and Signatures

I hereby certify that I have read and understood the above requirements; and I have the authority to make this application and that the information given is correct. I guarantee that the proposed work described with this application and the accompanying plans and drawing meet Clinton County's Zoning Ordinance.

STATE OF ILLINOIS)

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County of Clinton)

I, _____, a Notary Public, in and for said county, and state, do hereby certify that _____, personally known to be the same person(s) whose name(s) appear below and have appeared before me this day and acknowledged that the statements contained therein are true. Given under my hand and seal this ____ day of _____, _____.

(Notary Seal)

Notary Public Signature

If the applicant, or owner is performing the proposed work, they must sign as the owner & contractor

Applicants
Signature: _____ Date: _____
Owner(s)
Signature: _____ Date: _____

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If the information does not apply to your project, please disregard.

To apply for a Certificate of Zoning Compliance for a residence or structure that will contain a bathroom, a permit from the Clinton County Health Department is required **prior** to a building permit being issued. Please contact:

❖ **HOLLY TIMMERMANN**

Environmental Health Programs Manager

Clinton County Health Department

930 A Fairfax St.

Carlyle, IL 62231

Phone (618) 594-0324

Fax (618) 594-5474

Email: environmentalhealth@clintonco.illinois.gov

A private Sewage Application and Informational Packet can be downloaded on the Clinton County Health Departments website: www.clintoncountyhealth.com

PLEASE ALLOW 2 to 3 WEEKS FOR A SOIL SAMPLE AND AT LEAST FIFTEEN (15) DAYS FOR THE HEALTH APPLICATION PROCESS.

To apply for an address, please contact:

JAMI STASER

Clinton County Addressing

850 Fairfax St – Room 124

Carlyle, IL 62231

Phone #: 618-594-6631

Fax: (618) 594-6006

addressing@clintonco.illinois.gov

For flowage easement information, please contact:

* **DOUG WASMUTH**

Natural Resource Specialist

801 Lake Rd.

Carlyle, IL. 62231

Phone: 618-594-2484

Fax: 618-594-8369

douglas.wasmuth@usace.army.mil

To apply for a new entrance or mailbox required along a county highway, please contact:

❖ **DAN BEHRENS- COUNTY ENGINEER**

Clinton County Highway Department

479 21st Street

PO Box 188

Carlyle, IL 62231

Phone #: 618-594-2224

Fax: 618-594-2228

If you need additional information, please contact the Zoning Office at 594-6655.

Permits can be emailed to jami.staser@clintonco.illinois.gov or kay.thole@clintonco.illinois.gov or mailed to the Zoning Office.

LOT SIZE, SETBACK AND HEIGHT RESTRICTIONS BY DISTRICT SECTION 40-3-6

DISTRICTS	"A"	"AR"	"R1"	"R2"	"R3"	"C"	"I"
MINIMUM DISTRICT AREA	40 acres	10 acres	10 acres	10 acres	10 acres	2 acres	10 acres
MINIMUM LOT AREA	40 acres	3 acres	1 acre	10,000 sq ft or 2,500 sq ft per dwelling unit, whichever is greater	7500 sq. ft.	6000 sq. ft.	20,000 sq. ft.
MINIMUM LOT WIDTH(at established building line)	800 ft.	150 ft.	100 ft.	75 ft.	50 ft.	50 ft.	125 ft.
MINIMUM LOT DEPTH	800 ft.	150 ft.	100 ft.	100 ft.	100 ft.	100 ft.	150 ft.
MINIMUM SETBACKS From front lot line: (Except along County roads outside the incorporated limits of any city, village or incorporated town, the minimum setback shall be 100 ft from the center line of the road, & Township roads the minimum setback shall be 75 ft from the center line of the road). Along Interstate and State Routes, the minimum setback shall be 75 ft. from easements or right-of-way line.	50 ft.	50 ft.	**50 ft.	25 ft.	25 ft.	none – (only applies to incorporated areas)	50 ft.
From side lot line:	25 ft.	25 ft.	**25 ft.	10 ft.	10 ft.	None	25 ft.
From rear lot line:	25 ft.	25 ft.	**25 ft.	10 ft.	10 ft.	None	25 ft.
Maximum Height Structure	None	35 ft.	35 ft.	35 ft.	35 ft.	35 ft.	None

**Subdivisions existing prior to the adoption of this ordinance, on January 1, 1991, shall use the minimum setback requirements as established for the R2 District.

The above restrictions are for the particular district in which said lot/principal structure is located.