



CITY OF AVON LAKE, OHIO

ENGINEERING DEPARTMENT

150 AVON BELDEN ROAD • AVON LAKE, OHIO 44012-1699

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PRELIMINARY REVIEW APPLICATION

1. Applicant's Name: _____
(Company/Owner)
2. Project Location: _____
3. Zoning Classification: _____ PPN: _____
4. Project Description:

5. List Information/Plans Accompanying this Application:

6. Applicant's Signature: _____ Date: _____
Address: _____
Daytime Phone: _____ Home Phone: _____
7. Architectural/Engineering Firm: _____
Project Manager: _____
Address: _____
Daytime Phone: _____

DO NOT WRITE BELOW THIS LINE

Date Application was Received: _____

Fee Amount: _____ *Paid:* Yes No *Date:* _____

Date Sent to Department Heads: _____