

Application #: _____

Date: _____

**HARRISON TOWNSHIP ZONING DEPARTMENT
6750 OUTVILLE RD., PATASKALA, OHIO 43062 (740) 927-8277**

APPLICATION FOR HOME OCCUPATION PERMIT

Applicant Name: _____ **Phone #:** _____

Property Address: _____ **City/State/Zip:** _____

Mailing Address: _____ **City/State/Zip:** _____

Email Address: _____ **District & Parcel #:** _____ - _____

Zoning District: _____ **Existing Use:** _____

Nature of Occupation: _____

Total square feet of dwelling to be used for business: _____ **% of floor space:** _____

The undersigned is applying for a Home Occupation Permit, said permit is to be issued based the information and attachments to this application being true and correct and agrees to follow all applicable regulations. See "Home Occupation" in Article 3 of the Harrison Township Zoning Resolution for details.

Property Owner's Signature: _____ **Date:** _____

Attachments and supporting documentation needed:

- 1. Applicant must provide a written statement detailing the type and nature of the business. Please include how the business is compatible with the neighborhood.

(For Township Use Only)

Date Received: _____ **Fee Paid:** _____ **Check #:** _____ **Received by:** _____

Date Forwarded to BZA: _____ **Publication Date:** _____ **BZA Hearing Date:** _____

Home Occupation Decision: Approved Approved with Conditions Denied

Comments/Conditions: _____

_____ **Date:** _____

Zoning Inspector's Printed Name

Zoning Inspector's Signature