MONROE TOWNSHIP
2828 STATE ROUTE 222
BETHEL, OHIO 45106
513-734-6462

## RE-OCCUPANCY APPLICATION APPLICATION FEE \$75.00 Payable to Monroe Township

NAME OF PROPERTY OWNER							
ADDRESS OF PROP	ERTY						
			PHONE				
APPLICANT NAME	(IF DIFFERENT)						
			PHONE				
DESCRIPTION OF B	USINESS						
	ION						
ANY HAZARDOUS N	MATERIALS ON SITE? NO	YES	_ (IF YES WHAT TYPE AND HOW MUCH)				
	G: INSIDE						
DATE OF OPENING	(APPROXIMATELY)						
WILL A LIQUOR LIC	ENSE BE REQUIRED? YES_	NO	_				
NAME OF EMERGE	NCY CONTACT PERSON						
PHONE: DAYTIME							

\*\*\*\*YOU WILL BE REQUIRED TO OBTAIN AN INSPECTION FOR THE BUILDING AND PREMISES BY THE MONROE TOWNSHIP FIRE DEPARTMENT BEFORE YOUR PERMIT WILL BE ISSUED. PLEASE E-MAIL SDOWNEY@MONROETWP-OH.GOV AND NRITCHEY@MONROETWP-OH.GOV TO SCHEDULE YOUR INSPECTION. \*\*\*\*

<u>It is understood and agreed by the applicant that any error, mis-statement, or omission in the application for issuance of this permit may cause the permit to be revoked after issuance.</u>

Applicant's Signature	e		Date	
TOWNSHIP APPROV	AL: APPROVED BY:			
DENIED BY:		_ REASON:		
DATE:	PERMIT NUME	BER:		