

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 PROPERTY_____

CITY_____STATE_____ZIP CODE_____PHONE_____

APPLICANT NAME (IF DIFFERENT) _____

ADDRESS OF APPLICANT_____

CITY_____STATE_____ZIP CODE_____PHONE_____

DESCRIPTION OF BUSINESS_____

HOURS OF OPERATION_____

ANY HAZARDOUS MATERIALS ON SITE? NO_____YES_____ (IF YES WHAT TYPE AND HOW MUCH)_____

AVAILABLE SEATING: INSIDE_____OUTSIDE_____

DATE OF OPENING (APPROXIMATELY)_____

WILL A LIQUOR LICENSE BE REQUIRED? YES_____NO_____

NAME OF EMERGENCY CONTACT PERSON_____

PHONE: DAYTIME_____ NIGHTTIME_____

****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 GLANG@MONROETWP-OH.GOV AND TSEEHOUSEN@MONROETWP-OH.GOV TO SCHEDULE YOUR INSPECTION. ****

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.

Applicant's Signature _____ Date _____

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TOWNSHIP APPROVAL: APPROVED BY: _____

DENIED BY: _____ REASON: _____

DATE: _____ PERMIT NUMBER: _____