

ELYRIA TOWNSHIP ZONING BOARD OF APPEALS  
REQUEST FOR HOME OCCUPATION/CONDITIONAL PERMIT  
NEW/RENEWAL

I AM REQUESTING A CONDITIONAL ZONING PERMIT FOR A HOME OCCUPATION.

PRESENT ZONING DISTRICT: \_\_\_\_\_

DESCRIPTION OF PROPOSED CONDITIONAL USE \_\_\_\_\_

\_\_\_\_\_  
PLEASE PRINT NAME OF APPLICANT

\_\_\_\_\_  
PLEASE PRINT NAME OF OWNER

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
PHONE #

\_\_\_\_\_  
PHONE #

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

FEE'S	NEW ----- \$175.00	RENEWAL ----- \$ 75.00
	NEW/CO-EXISTING AERIAL TOWER PERMIT -----\$200.00	
	RENEWAL OF AERIAL TOWER PERMIT INCLUDING PIGGYBACK \$125.00	

**(MAKES CHECK PAYABLE TO ELYRIA TOWNSHIP TRUSTEE'S, CASH WILL NOT BE ACCEPTED)**

APPLICATION SHALL BE RECEIVED BY THE FIRST OF THE MONTH, IF YOU PLAN ON NOT RENEWING PLEASE MAIL APPLICATION BACK WITH STATEMENT ATTACHED WHY NOT RENEWING. IF YOU CONTINUE TO OPERATE A BUSINESS WITHOUT A PERMIT, YOU WILL BE IN VIOLATION OF OUR ZONING.

A NEW PERMIT FEE OF \$175.00 WILL BE CHARGED FOR LATE APPLICATIONS.  
**ALSO REQUIRED:** NAME AND ADDRESSES OF ADJOINING PROPERTY OWNERS, FORM IS ON REVERSE SIDE. ALL INFORMATION MUST BE COMPLETED.

**ALL OWNERS AND APPLICANTS MUST BE PRESENT** AT SCHEDULED HEARING OR IT WILL BE TABLED UNTIL YOU CAN BE PRESENT. YOU WILL BE NOTIFIED OF DATE AND TIME OF HEARING.

NOTE: IF YOUR ATTORNEY WILL BE PRESENT OR HANDLING THIS MATTER PLEASE CONTACT THE SECRETARY.

**MAIL TO:** BEVERLY E. SAMS, ZONING SECRETARY                      PH# 440-324-6288  
6214 ELYRIA AVENUE  
ELYRIA, OH 44035

**PLEASE FILL OUT BOTH SIDES**

ELYRIA TOWNSHIP  
HOME OCCUPATION CONDITIONAL  
APPLICATION PART II

BEFORE THIS HOME OCCUPATIONAL/CONDITIONAL PERMIT CAN BE CONSIDERED, THE ELYRIA TOWNSHIP ZONING BOARD OF APPEALS, WE MUST HAVE THE FOLLOWING INFORMATION:

PROPERTY LOCATED AT \_\_\_\_\_

NAME AND ADDRESSES OF ADJOINING PROPERTY OWNERS:  
\*\*\*\* PLEASE TYPE OR PRINT INFORMATION\*\*\*\*

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME AND ADDRESS OF PROPERTY OWNERS ACROSS THE STREET

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YOU WILL BE NOTIFIED OF THE DATE AND TIME OF THE ZONING BOARD OF APPEALS MEETING.

**ALL APPLICANTS AND OWNERS MUST BE PRESENT**

ELYRIA TOWNSHIP ZONING BOARD OF APPEALS  
BEVERLY E. SAMS, ZONING SECRETARY  
6214 ELYRIA AVENUE, ELYRIA, OH 44035  
440-324-6288