



Light-Ashburn Memorial Building
102 Willow Street
New Richmond OH 45157

APPLICATION FOR CHANGE OF OCCUPANCY/HOME OCCUPATION AND FLOODPLAIN DEVELOPMENT

PERMIT FEE \$25.00

PAYABLE TO: VILLAGE OF NEW RICHMOND

ALL INFORMATION MUST COMPLETE ON THIS APPLICATION BEFORE ZONING PERMIT WILL BE ISSUED (A SITE PLAN MAY BE REQUIRED)

NAME _____

ADDRESS _____ EMAIL _____

CITY _____ STATE _____ ZIP _____ PHONE _____

ADDRESS OF OCCUPANCY _____ PARCEL ID# _____

CITY _____ STATE _____ ZIP _____ ZONING CLASSIFICATION _____

NAME OF BUSINESS _____

TYPE OF BUSINESS _____

HOURS OF OPERATION _____ NUMBER OF EMPLOYEES _____

ANY STATE OR COUNTY PERMITS REQUIRED? (IE: LIQUOR LICENSE, DAY CARE LICENSE, VENDOR)

YES _____ NO _____ IF YES PLEASE EXPLAIN _____

ELEVATION OF PROPERTY (IN FT.) _____ (OBTAIN FROM CLERMONT CO. AUDITOR'S SITE)

WILL FLOODPROOFING BE PROVIDED? YES _____ NO _____ N/A _____ (ABOVE 505 FT.)

IF YES PLEASE DESCRIBE _____

IF NO PLEASE EXPLAIN _____

THIS PERMIT SHALL EXPIRE AND MAY BE REVOKED IF BUSINESS HAS NOT BEGUN WITHIN ONE (1) YEAR. YOU ARE RESPONSIBLE TO OBTAIN ALL STATE AND COUNTY PERMITS THAT ARE REQUIRED FOR YOUR BUSINESS/HOME OCCUPATION AFTER THE VILLAGE OF NEW RICHMOND HAS APPROVED AND ISSUED THIS PERMIT.

ANY ERROR, MISSTATEMENT OR MISREPRESENTATION OF FACT(S), WITH OR WITHOUT INTENT TO DEFRAUD, SHALL BE GROUNDS FOR REVOCATION OF SAID PERMIT.

APPLICANT'S SIGNATURE _____ DATE _____

THIS APPLICATION, SITE PLAN(S)-IF REQUIRED, AND FEES CAN BE MAILED OR HAND DELIVERED TO

VILLAGE OF NEW RICHMOND

102 WILLOW STREET

NEW RICHMOND, OHIO 45157

PHONE: 553-4146

ZONING DEPARTMENT INFORMATION

APPROVED _____ DENIED _____ (REASON _____) DATE _____

FEE PAID \$ _____ CHECK # _____ CASH _____ RECEIPT # _____

SIGNED BY: _____ TITLE: _____

PERMIT # _____ AC # _____

IS RITA FORM 48 ATTACHED? YES _____ NO _____

IF NO PLEASE EXPLAIN _____