

ANTWERP TOWNSHIP
APPLICATION FOR HOME OCCUPATION

All matters to be considered by the Zoning Board of Appeals shall be submitted to the Antwerp Township Office no later than 4:00 PM at least fifteen (15) days prior to the Zoning Board of Appeals meeting at which the request is to be considered.

Applicant, by signature acknowledges the following requirements.

1. Have read Home Occupation Ordinance, Section 9.5 (reverse side of form)
2. Will appear at _____ Zoning Board of Appeals Meeting and make a presentation of request covering all questions/elements on checklist (reverse side of form).

Applicant's Name: _____

Property Address: _____

Property Number: _____ Tax Plate Number: _____

Township Section Number: _____ Property Zoning: _____

Applicants Phone Numbers: Home: _____ Business: _____

Description of home occupation requested (BE SPECIFIC):

Date: _____ Applicants Signature: _____

Processing fee received: \$ _____ Received by: _____
(Township Employee)