



DEPARTMENT OF DEVELOPMENT & ZONING

HOME OCCUPATION STATEMENT FORM

5111 South Old 3C Highway, Westerville, OH 43082

P: 614.899.0725

www.GenoaTwp.com

Zoning@GenoaTwp.com

LOCATION INFORMATION

Property Owner Name(s):

Street Number:

Street Name:

City:

State:

ZIP Code:

Phone Number: ()

Fax Number: ()

E-Mail Address:

Lot Size (acres):

Zoning District:

OPERATOR'S INFORMATION - If the same as property owner, check here: []

Name:

Street Number:

Street Name:

City:

State:

ZIP Code:

Phone Number: ()

Fax Number: ()

E-Mail Address:

STATEMENT - Please include any additional information with your submission in a separate document, as necessary.

I/We, the undersigned, voluntarily swear and affirm that my/our Home Occupation, established on the subject property, is in compliance with Section 1708.01 of the Genoa Township Zoning Resolution and does not require a Conditional Use permit as otherwise required by Section 1708.02 of said Resolution.

Description of Home Occupation:

I/We understand and agree that, if required at a later date, a Conditional Use permit for a Home Occupation shall be applied for in accordance with Section 1708.02 of the Genoa Township Zoning Resolution. Similarly, I/We understand that should this occupation no longer meet the definition of Home Occupation and/or no longer comply with the aforementioned zoning standards for Home Occupations, it would no longer be permitted and, as such, would cease operation immediately. I/We understand that submittal of this document is optional and recognize that failure to comply with the Genoa Township Zoning Resolution may result in enforcement in accordance with said Resolution.

Printed Name

Signature

Date:

EFFECTIVE: 9/1/18

Date Received: Received By: