

**ALL INFORMATION MUST BE COMPLETED OR
THE OCCUPANCY PERMIT WILL NOT BE ISSUED.**

Cost: \$10.00

Payable to: Raccoon Township
OP

**Application
Occupancy Permit
Raccoon Township Zoning Ordinance #99-1**

Applicant (Purchaser): _____

Property to be Occupied _____
(address) _____

Phone: _____

Previous Owners: _____

Parcel # _____

Zoning District _____

Proposed Use: _____
(if using for a business: Contact the office for a conditional use permit)

Date of Occupancy: _____

**I, the undersigned owner, hereby state that the use of the above mentioned
property complies with all applicable provisions of Raccoon Township
Zoning Ordinance #99-1.**

Date: _____
Applicant (Purchaser)

Approved this _____ day of _____, 20 ____.

Daisy R. Stone, Secretary