



Justin Harsha, Mayor

Brianne Abbott, Safety & Service Director

APPLICATION FOR TEMPORARY USE PERMIT

Name _____ Phone _____ Email _____

Address _____

Height _____ Weight _____ Color of Eyes _____ Hair Color _____

Do you wear glasses? _____ Do you have a mustache? _____ Are you a citizen of the U.S.? _____

Make of car _____ Year _____ Type _____

Have you ever been convicted of an offense other than a minor traffic violation? If so, give dates.

Are you addicted to narcotics or alcohol? _____

Description of your business use: _____

Time Frame of Usage (if applicable) _____

I DO SOLEMNLY SWEAR THAT THE ANSWERS AS GIVEN HEREIN HAVE BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE ARE TRUE, CORRECT AND COMPLETE.

Applicant Signature _____

Date _____

Safety & Service Director _____

Date _____

Income Tax Administrator _____

Date _____

Please attach a copy of all check list items listed below to application.

Checklist:

- ☐ Driver License
- ☐ Written Proof from Property Owner(s) Granting Permission to Utilize Property
- ☐ Vehicle Registration
- ☐ Liability Insurance
- ☐ Proof of Filing at Hillsboro Income Tax Bureau

155.049

This permit shall be granted in the form of a temporary and revocable permit for not more than a 12-month period, and may be subject to conditions as placed on the temporary use by the Board of Zoning Appeals to safeguard the public health, safety, convenience, and general welfare.

155.051.B.1

Appeals shall be filed within 30 days of the date of the meeting or notice in which the decision was made by filling a written notice of appeal.