CITY OF HEATH

Division of Building and Zoning

Eddie Hunt
Chief of Building and Zoning

Rick Myers
Zoning Inspector

1287 Hebron Road * Heath, Ohio 43056 * P: 740/522.1420 * F: 740/522.6324 * www.heathohio.gov

VENDOR'S PERMIT

THE FOLLOWING INFORMATION IS TO BE FILLED OUT BY THE APPLICANT:

Applicant's Name: _____ Applicant's Phone Number: _____

Applicant's Home/Business Address: _____

Address of Temporary Business Location: _____

Write a brief statement concerning the nature, character and quality of goods, wares or merchandise to be sold or offered for sale by the applicant in the City of Heath.

All applicants must receive the property owner's signature and written approval in order to conduct business on their property. Please have the property owner sign the approval letter as well as the space below.

Property Owner's Signature: _____ Property Owner's Phone Number: _____

THE FOLLOWING INFORMATION IS TO BE FILLED OUT BY THE ZONING DEPARTMENT:

License No. _____ Date Issued: _____

Fees Paid: $_____ Date Expires: _____

Today's Date: _____

Bond submitted on date: _____ For the amount of: $ _____

Sign Permit Required: ☐ Yes ☐ No

FORM NOT VALID UNLESS STAMPED BY THE CITY OF HEATH INCOME TAX COMMISSIONER BELOW

For the approval by the HEATH INCOME TAX BUREAU Under Ordinance No. 26-76

Approved By: _____ Date: _____