

**POLK TOWNSHIP, CRAWFORD COUNTY, OHIO**

**APPLICATION FOR A TEMPORARY VISITOR'S ZONING PERMIT**

THE UNDERSIGNED HEREBY APPLIES FOR A TEMPORARY VISITOR'S ZONING PERMIT IN ACCORDANCE WITH SECTION 600.4 OF THIS RESOLUTION.

NAME OF LANDOWNER \_\_\_\_\_

ADDRESS \_\_\_\_\_

LOCATION (If other than above) \_\_\_\_\_

DATE TEMPORARY RESIDENCE ESTABLISHED \_\_\_\_\_

\_\_\_\_\_  
Signature

A TEMPORARY VISITOR'S ZONING PERMIT IS HEREBY ISSUED IN ACCORDANCE WITH THIS APPLICATION. VALID UNTIL \_\_\_\_\_

FEE \$ \_\_\_\_\_

\_\_\_\_\_  
Zoning Inspector