

Hopewell Township

1700 Clark Boulevard
Aliquippa, PA 15001

Zoning Occupancy Permit Application (Businesses)

**ZONING OCCUPANCY PERMIT APPROVAL IS REQUIRED FOR ALL NEW
BUSINESSES THAT LOCATE IN OR EXISTING BUSINESSES THAT
RELOCATE WITHIN HOPEWELL TOWNSHIP**

THE FOLLOWING INFORMATION IS REQUIRED

1. **Name of Business:** _____
Address/Location or Business: _____

2. **Proposed business type pursuant to the Hopewell Township Zoning Ord.:**

3. **Business owner name:** _____
Owner address: _____
Owner phone #: _____

4. **Property owner name:** _____

*** Submit two (2) copies of a drawing or sketch plan layout of the floor plan for the business identifying rooms, building areas and exits doors.**

APPLICANT SIGNATURE: _____

PRINT NAME: _____

DATE: _____

THIS BOX - TOWNSHIP USE ONLY

Date Received: _____

Zoning Approval #: _____

Permitted Use: _____

Approval Date: _____

Twp Zoning Approval: _____

*** Verify that business owner has contacted
the Township Tax Office**