



## City of Mentor-on-the-Lake

5860 Andrews Road, Mentor-on-the-Lake, OH 44060-2827

Phone: (440) 257-7216 Fax: (440) 257-2766

www.CityMOL.org

---

### APPLICATION FOR CONDITIONAL USE PERMIT

NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

RESIDENCE ADDRESS: \_\_\_\_\_

TELEPHONE (HOME): \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

TELEPHONE (BUSINESS): \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

OCCUPY BY (CHECK ONE)     LEASE\*     RENT\*     OWN

\*IF LEASE OR RENTAL, NAME AND ADDRESS OF PROPERTY OWNER:

---

LIQUOR SERVED ON PREMISES?                     YES                     NO

LIVE ENTERTAINMENT OR DANCING?                     YES                     NO

**SIGNATURE OF APPLICANT** \_\_\_\_\_ **DATE** \_\_\_\_\_

**REASON FOR CONDITIONAL USE PERMIT:**

---

FEE AMOUNT \_\_\_\_\_ RECEIVED BY \_\_\_\_\_ DATE \_\_\_\_\_

**PLEASE NOTE:** APPLICANT MUST APPEAR AT PUBLIC HEARING SCHEDULED FOR:

---

FAILURE TO APPEAR AT THE PUBLIC HEARING WILL RESULT WITH NO ACTION TAKEN ON REQUEST!