



# Zoning Permit

Zoning District: _____
Date: _____

**NOTE:** No application shall be considered complete unless all the following information is attached. The Zoning Officer may waive any of the requirements, except fees, and may require additional information as necessary for proper consideration of this request. No fees are required at this time.

3 Three copies of a scaled drawing which shows the shape and dimension of the lot to be used, the shape and dimension of all types of existing and proposed uses and structures, and the location of rights-of-way on the lot. The drawing must also show the location of existing or proposed parking and screening required as well as required setback lines.

3 Other \_\_\_\_\_

*Please PRINT the following information clearly:*

STREET #	ADDRESS	SUBDIVISION	LOT #
<b>Purpose for Application:</b> _____			
<b>Approx. new square footage:</b> _____		<b>Size of Lot:</b> _____	
<b>Business Name:</b> _____		<b>Phone Number:</b> _____	
<b>Property Owner's Name:</b> _____		<b>Phone Number:</b> _____	
<b>Address: (if different than above)</b> _____			
<b>Applicant's Name: (if different than above)</b> _____			
<b>Address: (if different than above)</b> _____		<b>Phone Number:</b> _____	
<b>Tax Map Parcel Number:</b> _____ - _____ - _____		<b>Fax #:</b> _____	

*I hereby certify that the information provided hereon is, to the best of my knowledge, correct and complete. I understand that providing false or incomplete information or violating an approved zoning permit may be grounds for revocation of the permit and any associated building permit.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\***

Based upon the information provided with this application, the work as proposed meets the requirements of the zoning ordinance and other land use regulations in effect in the city's jurisdiction. Applicable setbacks and a general description of use limitations are attached.

*Additional Remarks/Conditions:* \_\_\_\_\_

\_\_\_\_\_ Setbacks \_\_\_\_\_

\_\_\_\_\_  
City Zoning Officer

\_\_\_\_\_  
Date