

Town of Odessa

*P. O. Box 111
Odessa, DE 19730*

**APPLICATION FOR ZONING PERMIT
(Zoning Compliance Form)**

\$20.00 compliance fee/\$40.00 inspection & review fee

No. _____

Applicant _____ Mailing Address _____
Phone _____
Location of Property _____

Architect _____ Address/Phone _____
Builder _____ Address/Phone _____

NOTE: Fill in the following information as accurately and completely as possible. On the back of this page or on an attached sheet indicate by scale drawing the shape and dimensions of the lot, location of streets and alleys, shape and dimensions of all existing and proposed buildings, and distances from buildings to lot lines. This application is not acceptable unless all required information is furnished.

APPLICATION IS FOR:

Demolition/ Moving New Construction Alteration/ Renovation Change in Use

ZONING: R-1 C-1 H NE C-2 PND PCD

Proposed Use / Work To Be Done _____
No. of Families, Dwellings, or Rooms _____
Lot Type (corner or interior) _____
Does lot front on public street? Yes / No
No. of Off-Street Parking Spaces _____
No. of Off-Street Loading Spaces _____
Signs (describe) _____
Lot Width _____
Lot Area Per Family _____
Lot Depth _____
Yards: Front _____
 2 Sides _____
 Rear _____
No. of Stories _____
Height _____

The above information is, to the best of my knowledge, true and accurate. It is understood and agreed that any error, misstatement or misrepresentation of fact, with or without intention on my part, such as might, if known, cause a refusal of this application, or any alteration or change in plans made without approval of the Zoning Administrator subsequent to the issuance of the building permit, shall constitute sufficient grounds for the revocation of such permit.

Date _____ Signed _____

PART B
To be filled in by Zoning Administrator

Application Approved / Disapproved _____
Date

Fee Paid in the Amount of \$_____.00

Permit No. _____ Issued _____
Date

Signed _____
Zoning Administrator

Reason for Disapproval: _____

