APPLICATION FOR ZONING PERMIT

No. __________________

Applicant ______________________
Phone ______________________
EMAIL Address: ______________________
Location of Property ______________________
Parcel Number: ______________________

Architect ______________________
Address/Phone ______________________
Builder ______________________
Address/Phone ______________________

NOTE: Fill in the following information as accurately and completely as possible. Please attach scale drawing of 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. Fees may apply to plan review.

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 ______________________

Revised: 01/06/22
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: ________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Revised: 01/06/22
04/23/19
02/16/16
04/04/11
10/27/10
06/04/09
11/25/08