

Application for a Zoning Permit

Map:	Filing Fee:	The applicant hereby requests a zoning permit, to be issued based on the representations made herein. Permit is voided in the event of misrepresentation.					
Parcel:	\$50.00						
Landowner Information:	Name:						
	Address:						
	Telephone:		Email:				
Applicant Information:	Name:						
	Address:						
	Telephone:		Email:				
Property Information:	Lot Size:	acres	sq. ft.	Water Supply:			
	Road Frontage:	ft.		Sewerage System:			
Reason For Application	<input type="checkbox"/>	New Construction	<input type="checkbox"/>	Change of Use	Other (Specify):		
	<input type="checkbox"/>	Structural Alteration	<input type="checkbox"/>	Home Occupation			
Primary Structure Information:	Dimensions		Setbacks		Floor Areas		
	Length:	ft.	Front:	ft.	Total Area:	sq. ft.	
	Width:	ft.	Rear:	ft.	Total Living Area:	sq. ft.	
	Height:	ft.	Side:	ft.	Proposed Use Area:	sq. ft.	
	Stories:		Side:	ft.			
	Existing Use:						
	Proposed Use:						
Accessory Structure Information:	Dimensions		Setbacks		Floor Areas		
	Length:	ft.	Front:	ft.	Total Area:	sq. ft.	
	Width:	ft.	Rear:	ft.	Total Living Area:	sq. ft.	
	Height:	ft.	Side:	ft.	Proposed Use Area:	sq. ft.	
	Stories:		Side:	ft.			
	Existing Use:						
	Proposed Use:						
A general plot plan showing the location of the property and buildings must be attached to the application. If a Zoning Board of Adjustment Hearing is deemed necessary, all applicable filing and notification fees will be charged.							
Land Owner/Authorized Agent Signature: _____							
O F F I C E U S E O N L Y	Received By:		Fee Paid:		Cash	Check #: _____	
	Date:		Name on Check:				
	<input type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	<input type="checkbox"/> Deferred to Zoning Board of Adjustment		
	Reason(s) for Denial/Referral:						

Date(s) of Inspection(s):							
Authorized Signature: _____					Title: _____		