ZONING VERIFICATION REQUEST

Non Refundable Fee: $ 115.00
Receipt No.: ________________ Date: ________________

Primary Contact Email Address: _______________________________________
Applicant's Name: __________________________________________________
Business Name: ______________________________________________________
Phone No.: ______________________
Legal Description: ____________________________________________________
Lot __________ Block __________ Section/Plat No. _______________________
Parcel ID Number: ____________________________________________________
Subject Street Address: _______________________________________________

Please Note: This request is only for the zoning of a particular piece of property and the future land use. If further information is required, you must apply for a Request for Land Use and Miscellaneous Research.

Below is to be completed by Planning and Zoning

Zoning: ____________________________________________________________
Land Use: __________________________________________________________

*Note: Copies of the code that lists permitted uses are enclosed.

Planner: __________________________ Date: ____________________________

Revised 04/11/19