



ZONING CERTIFICATE

CERT. No. _____

DATE _____

ADDRESS: _____ P.P.# _____

BRIEF LEGAL DESCRIPTION: _____

LANDOWNER'S NAME AND ADDRESS:

APPLICANT'S NAME AND ADDRESS

(If land trust, give trust number, trustee and list all beneficiaries on separate sheet)

RELATIONSHIP OF APPLICANT TO OWNER: _____

APPLICABLE ZONING DISTRICT: _____ APPLICABLE L.U.I.: _____

MINIMUM BUILDING SETBACKS AND SIZE:

FRONT: _____ MAX. HEIGHT: _____

REAR: _____ MAX./MIN. FLOOR AREA: _____

SIDE: _____ OTHER: _____

SIDE: _____

APPROVED USE: _____

CONDITIONS OF APPROVAL (permitted use, accessory use, special use, rezoning, site plan, variance, etc. - cite case no.):

DOES THIS REQUIRE A SUBDIVISION PLAT? ___ YES ___ NO

If NO, check one of the following as applicable: ___ Platted lot in platted S/D ___ Existing Parcel ___ City S/D Exempt #

If EXTERIOR CONSTRUCTION OR A NEW BUILDING ADDITION IS PROPOSED, A SKETCH SHOWING PROPERTY LINES, BUILDINGS (existing and proposed), PARKING LOTS (existing and proposed), DIMENSIONS AND MINIMUM SETBACKS IS REQUIRED.

IS SKETCH ATTACHED? ___ YES ___ NO

APPLICANT'S SIGNATURE: _____

THIS CERTIFICATE IS ISSUED SOLELY FOR THE USE INDICATED, AT THE LOCATION SPECIFIED, ON THE DATE ISSUED.

ZONING CERTIFICATE APPROVED BY:

NAME: _____ TITLE: _____ DATE: _____

FEE: _____ COLLECTED BY: _____

Fees: \$10 (or \$5 with building permit). No cost if issued subsequent to Rezoning, Spec. Use, Site Plan or Variance.

cc: -Applicant -Building & Neighborhood Services -Planning PP File -Zoning Certificate File