

OFFICE USE ONLY		
Date:		
Application #:		

## **APPLICATION OF ZONING PERMIT AND CLASSIFICATION**

1)	Property owner first/last name:		
	Mailing Address:		
	Phone #: Email Address:		
	Mailing Address:		
	Phone #:	Email Address:	
2)	Site Location:		
	Subdivision name (if applicable):		
	Tax Map Section: Block:	Lot:	
	Acreage of property:		
3)	Existing use and facilities (indicate ea	ach existing building, approximate size, use and other facilities,	
	parking lots, well and septic, etc.):		
4)	This project is: expansion of us	se change of use new construction	
5)	Proposed use (describe):		
6)	List any deed restrictions, HOA restrictions or covenants for proposed use:		
8)	location on map with dimensions to all property lines and other buildings on property) SURVEY MAP MAY BE REQUIRED  List any physical restrictions to this project (floodplain, wetlands, steep slopes, etc.):		
work i		e the owner or authorized agent of the owner for which the foregoing duly authorized to perform such work, and that all work will be te, County and Local Laws.	
Date	<del></del>	Applicant signature	
CODE	ENFORCEMENT OFFICER CLASSIFICAT	TION	
1)	Permitted use subject to obtaining or	ne or more of the following:	
a)	_ Subdivision approval (Major/Minor)	d) Building Permit	
b)	_ Special Use Permit	e) Miscellaneous Permit	
c)	_ Site Plan Approval	f) Inspection by the CEO	
		g) Other:	
Date	<del></del> -	Code Enforcement Officer	