

Durwood E. Bowden, Director
Brenda G. Ballard, Asst. to the Public Works Director
Latoya D. Raysor, Administrative Assistant



David M. Epting, Building Official/Code Enforcement
Building Inspector/Code Enforcement
Gene Nelson, Building Inspector/Code Enforcement

**PUBLIC WORKS DEPARTMENT
BUILDING INSPECTION/ZONING**

REQUEST FOR VERIFICATION OF ZONING COMPLIANCE

<u>Office use only</u>	
Date Received: _____	Date Completed: _____

Fee: \$20.00 Commercial ___ \$10.00 Residential ___

I _____ hereby request verification that the following use is allowed at the following location: **An address and tax map number are both required. If you need assistance locating the tax map number please contact our office for help.**

Existing Use: _____ yes _____ no

Address _____ Tax Map # _____

Description of use and NAICS code: _____

Note: A request for Verification of Zoning Compliance is normally completed within three (3) to five (5) business days; however some requests will require longer research and may not be done within this time frame. Requests may be faxed or mailed to the address at the bottom of the page.

Please provide the phone number you can be reached at: _____

Please choose and complete one of the following options as your preferred means of contact:

Mailing Address: _____

Email Address: _____

Fax Number: _____

The receipt and/or approval of this application does not grant the authority to violate or cancel the provisions of any state or local law regulating the use of the property referenced herein nor does it constitute approval for such use.

By signing this application I certify that all information contained in this application is accurate to the best of my knowledge.

Signature