

## APPLICATION FOR PERMIT (GENERAL)

1)	Owner/Applicant:			
	Phone: ()	Email:		
	Address:	<del> </del>		
	Street	City	Zip	
	Name of Agent (if any):			
	Phone: ()	Email:		
	Address:			
	Street	City	Zip	
2)	Property of address:			
3)	Legal description:			
4)	Contractor (if any):			
5)	Zoning district:			
	Proposed activity:			
7)	Description of anticipated activity:			
8)	This applicant agrees to furnish any additional information required for review and processing of the application.			
his/hei pertair	wner/applicant/agent hereby declares that all r knowledge, that all conditions and standard ning to this use have been met or have been ation sketch maps, drawings or survey and that the declaration.	Is set out in the Zonin proposed to be met, a	g Regulations and that along with this	
Owner/	/Applicant Signature:	Date:		
Authorized Agent Signature		Date <sup>.</sup>		

(Applicant or his legal representative must be present at the hearing, or the matter will be tabled.)

Disclaimer: This permit was reviewed and considered based upon the information presented at the time of the hearing. If any of the information presented for consideration in determining the granting of this permit is incorrect or false, this permit becomes null and void.



OFFICIAL USE ONLY				
	Date filed: Fee: Paid: Receipt #: Received by:			
Permit Approved for:				
On: Date	By: Zoning Administrator			
Conditions Attached to Permit:				
Permit Denied:	Ву:			
Date	Zoning Administrator			
Reason(s) For Denial:				

\*THIS PERMIT BECOMES NULL AND VOID 60 DAYS AFTER THIS DATE UNLESS THE TYPE OF ACTIVITY COVERED BY THE PERMIT IS COMMENCED.