

ZONING PERMIT APPLICATION \$50

Fee Non-Refundable

Fee Non-Refundable Contractor Name:						
Address:			Address:			
Email:			Email:			
Phone:			Primary Phone:			
Block:	Lot:		Secondary	Phone:		
Survey Required	for the follow	<u>ving</u> ; Circ	le one			
Shed Deck	Garage Addit Deck Pool		ion Fence(good side faces out)			
Total S	F Len	gth	x Wic	lth :	x Height	
Material		Ingrou	Inground Pool		Aboveground Pool	
Setbacks:	front		back	rt side	If side	
Solar: than 35'	height of pan	els off ro	of. Please no	ote grade level	cannot be more	
Applicant Signa	iture:					
Zoning Departr	nent Signatur	e:				