



ZCLR \_\_\_\_\_

## ZONING CLEARANCE

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**PLEASE COMPLETE THE FOLLOWING INFORMATION (REQUIRED):**

PROJECT ADDRESS \_\_\_\_\_

**APPLICANT(S) NAME** \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

**PROPERTY OWNER(S) NAME** \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

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**ZONING CLEARANCE TYPE**☐ New Paving or Impervious Surfaces☐ Antennas Wireless communication facilities☐ Other \_\_\_\_\_

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**\*\*\*PLEASE ANSWER THE QUESTION ON PAGE 2\*\*\***

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THE APPLICANT AND PROPERTY OWNER HEREBY DECLARE UNDER PENALTY OF PERJURY THAT ALL THE INFORMATION SUBMITTED FOR THIS APPLICATION IS TRUE AND CORRECT.

\_\_\_\_\_  
APPLICANT'S SIGNATURE\_\_\_\_\_  
DATE\_\_\_\_\_  
PROPERTY OWNER'S SIGNATURE\_\_\_\_\_  
DATE

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**ACTION TAKEN**☐ **APPROVED**☐ **CONDITIONALLY APPROVED**☐ **DENIED****CONDITIONS/REASONS FOR DENIAL:** \_\_\_\_\_**BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_ **EXPIRATION:** \_\_\_\_\_

THERE IS A TEN (10) DAY APPEAL PERIOD FOR THIS APPLICATION. APPEALS MUST BE SUBMITTED IN WRITING TO THE COMMUNITY DEVELOPMENT DIVISION WITH A \$772.00 APPEAL FEE BY \_\_\_\_\_ P.M. ON \_\_\_\_\_.

DATE FILED \_\_\_\_\_ RECEIPT NO. \_\_\_\_\_ PAID \_\_\_\_\_ RECEIVED BY \_\_\_\_\_

1. Please describe the activity for which the Zoning Clearance is sought. Provide as much detail a possible on the proposed use and/or structure.