



Fee Collected \$ \_\_\_\_\_  
Receipt # \_\_\_\_\_  
Date Received: \_\_\_\_\_

**ZONING PERMIT APPLICATION**  
**\$35.<sup>00</sup> Fee (hourly staff billing rate may also be charged)**

Date Permit Issued: \_\_\_\_\_ Date Permit Expires: \_\_\_\_\_

**APPLICANT MUST COMPLETE INFORMATION BELOW:**

Owners Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address location: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Applicant/Contractor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**TYPE OF WORK:**

\_\_\_\_\_ Fence (Max. height 4 ft. in front; max. 6 ft. side/rear yards)  
(Post and rails must face inside)

\_\_\_\_\_ Shed (120 sq. ft. or less-if over 120 see building permits)

\_\_\_\_\_ Other \_\_\_\_\_

- Please attach a scaled site plan drawing showing the following: property lines, all existing structures, all proposed improvement and there setbacks from property lines.

\_\_\_\_\_  
Owner/Applicant's Signature

\_\_\_\_\_  
Date

\*\*This application/permit must be approved and a signed copy received from the Zoning Department before any type of work can begin. Failure to complete the application will be subject fines as detailed in City Code Title 1-4-3.

**Zoning Department Approval:**

**Conditions:**

**Name:** \_\_\_\_\_

\_\_\_\_\_

**Title: Community Development Director**

\_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_

Utility Bill Current? Y/N Act# \_\_\_\_\_ Non-user? Y/N By \_\_\_\_\_

Comments: \_\_\_\_\_