

NEW MADISON ZONING PERMIT APPLICATION

Property Location _____

Lot Number _____ Plat _____

Property Owner _____

Address _____ Phone _____

Occupant _____

Name of Contractor _____

Address _____ Phone _____

Proposed Type of Use _____

Residential Office Commercial Industrial

Other Specify _____

Plot Plan must be submitted showing the actual lot dimensions (including easements), the intended use of all land and buildings.

Lot Size Area _____ Frontage _____ ft. Lot Depth _____ ft.

Bldg Size First Floor _____ sq. ft. Total _____ sq. ft.

Bldg Height (above established grade) _____ ft.

Valuation \$ _____ Flood Plain Yes No

I hereby swear the information and statements given on this application are true and correct to the best of my knowledge. I understand if the information in this application is not correct or complete, the result may be the invalidation of this and all subsequent permit(s) issued in conjunction with this Zoning Certificate.

Date Filed _____ Applicant Signature _____

Permit Number _____ **Issue Date** _____

Section _____ **Town** _____ **Range** _____

Parcel ID Number _____

Zoning District Classification _____ **Permit Fee** _____

Article _____ **Section** _____ **Use** **Conforming** **Non-Conforming**

Special, see Board of Zoning Appeals Case Number BZA _____

Approved **Conditionally Approved** **Disapproved**

(If application is conditionally approved or disapproved; see remarks or attached comments for explanation)

Remarks/Restrictions _____

Signature of Authorizing Official _____ **Date** _____