



ZONING LETTER REQUEST FORM

Applicant Information

Applicant Name: _____

Applicant Address: _____

Phone: _____ Instructions upon Completion: _____ US Mail to: _____

_____ Email to: _____

_____ Fax to: _____

_____ Call for pick up

Property Information

Location/Address: _____

Assessor's Parcel Number(s): _____ Zone: _____ Redev Area?: _____

Information Requested in Letter: _____

Staff Use

File No: _____ Date Submitted: _____

DST: _____ Project Planner: _____

Zone: _____ General Plan: _____ Redev Area: _____

SPA: _____ SPA LUD: _____ Other: _____

Date Sent: _____ via: _____ By: _____