

**ZONING CERTIFICATE REQUEST FORM**

PARTY REQUESTING FORM  
MAILING ADDRESS &  
PHONE & FAX NUMBERS

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COMMON ADDRESS OF PROPERTY

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PARCEL NUMBER OF PROPERTY

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SELLER OF PROPERTY  
BUYER OF PROPERTY

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NUMBER OF BEDROOMS  
SQUARE FOOTAGE OF EACH

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LEGAL DESCRIPTION:

**OFFICE USE**

MAXIMUM OCCUPANTS IN EACH  
BEDROOM  
NUMBER OF ALLOWABLE  
OCCUPANTS IN RESIDENCE  
ZONING CLASSIFICATION  
BILL CHESHARECK  
BUILDING & ZONING OFFICER

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