



CITY ZONING VERIFICATION LETTER REQUEST FORM

FEE: \$20.00 (per letter)

DATE OF REQUEST: _____

REQUESTED BY: _____ **Phone:** _____

E-mail Address (if applicable): _____ **Fax:** _____

PROPERTY OWNER*: _____

Mailing Address: _____

**The letter will be addressed to the property owner unless otherwise instructed.*

PROPERTY ADDRESS: _____

Township _____ **Range** _____ **Section** _____

Parcel acreage _____ **Tax Parcel Number** _____

Zoning District _____

WHAT SPECIFIC INFORMATION ARE YOU REQUESTING BE ADDRESSED IN THIS LETTER? _____

ATTACH A COPY OF ALL RECORDED PROPERTY DEEDS OR OTHER INSTRUMENTS OF CONVEYANCE (E.G. DEED OF TRUST) FOR THE SUBJECT PROPERTY FROM OCTOBER 1978 TO PRESENT DAY. (NOTE: THE CITY DOES NOT PROVIDE DEED OR TITLE SEARCH SERVICES. THIS MUST BE PROVIDED BY THE APPLICANT.)

ATTACH A COPY OF THE CURRENT PLAT MAP OF THE PROPERTY

Received By:	Date:	Fee:	Receipt No:
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