

## CHECKLIST FOR ZONING PERMIT APPLICATION

After filling out this checklist, please initial and date at bottom

Address of Property: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Phone# to contact: \_\_\_\_\_

Email to contact: \_\_\_\_\_

1	Zoning Location Survey – 3 copies with Green Area Calculations	
2	Grade Plane Calculations- 1 copy	
3	FAR Calculations –review plans FAR (within 10% of Max allowable) – 1 copy plans	
4	Construction Plans- 2 copies	
5	Fee	

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_