



Zoning / Work Order Confirmation– Information Request Form

Applicant Information

Firm / Name _____ Date of Request _____
 Address _____ Reply by: Mail Email Fax

 Telephone _____
 Fax _____
 Email _____
 Attention _____
 Required Date _____

Property Information

Owner / Transaction _____
 Civic Address _____
 Legal Description _____
 Roll Number **3411-** _____
 Closing Date _____
 File # _____

Current Use

Current Use _____

2018 Rates – See Applicable Fees Below

- Zoning Confirmation / Work Order - \$45.00

For Office Use Only

Date Received: _____
 Date Completed: _____
 Zoning: _____
 OP: _____
 Roll Number: _____
 Copied to: _____
 Active Permit: Yes No
 Permit #: _____
 Notes:

