



Application for  
Residential Zoning Clearance Permit

Date \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE NUMBER OF APPLICANT: \_\_\_\_\_

OWNER OF PROPERTY (if different from applicant) \_\_\_\_\_

OWNER ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PROJECT ADDRESS (if an address exist): \_\_\_\_\_

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SUBDIVISION NAME: \_\_\_\_\_ PHASE # \_\_\_\_\_ MAP # \_\_\_\_\_ LOT # \_\_\_\_\_

BUILDING (HEATED SF) \_\_\_\_\_ (UNHEATED SF) \_\_\_\_\_ BUILDING HEIGHT \_\_\_\_\_ (Cannot exceed 35 feet)

DRIVEWAY AREA (SF) \_\_\_\_\_ SIDEWALK AREA (SF) \_\_\_\_\_ DETACHED AREA/BUILDING (SF) \_\_\_\_\_

IS THERE ANY FLOODPLAIN LOCATED ON THE PROPERTY? YES ☐ NO ☐

IF YOU ANSWERED YES, THEN PLEASE STATE THE LOWEST FINISHED FLOOR ELEVATION (INCULDING BASEMENT): \_\_\_\_\_

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CONTRACTOR INFORMATION:

COMPANY NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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THE UNDERSIGNED HEREBY MAKES APPLICATION TO BUILD A BUILDING OR STRUCTURE AT THE PROJECT ADDRESS SHOWN IN ACCORDANCE WITH THE SETBACKS FOR THE PROPERTY. THE APPLICANT UNDERSTANDS THAT NO ENCROACHMENTS (STRUCTURES, WALLS, OVERHANGS, PLANTINGS, ADDITION OR REMOVAL OF FILL) ARE ALLOWED ON ANY CITY UTILITY EASEMENTS LOCATED ON THE PROPERTY.

SIGNATURE OF APPLICANT OR AS AGENT OF OWNER: \_\_\_\_\_

\*\*\*\*\* FEES ARE DUE PRIOR TO ISSUANCE OF PERMIT \*\*\*\*\*