

ZONING PERMIT APPLICATION

In accordance with Article IV, Section 401 of the Zoning Law of the Village of Gainesville, the Zoning Officer is empowered to issue a zoning permit for any plans regarding the construction or alteration or demolition of any building or part of any building, or the change in the use of any land area or part thereof, where it is determined that such plans are not in violation of the provisions of the Zoning Law of the Village of Gainesville. This Zoning Permit, if approved, shall expire in twelve (12) months from the permit approval date listed below unless the project is completed. The Zoning Officer may grant an extension for term of completion and include any conditions or requirements deemed necessary or desirable. If a project is not initiated within six (6) months of the issuance of the permit, the permit issued shall be considered null and void.

Application No.: _____ Application Date: _____
Tax Map No.: _____
Owner: _____ Phone Number: _____
Address: _____
(Street) (City) (State) (Zip Code)
Present Use of Land: _____ Intended Use of Improvements: _____

Applications for Zoning Permits shall be accompanied by a layout sketch, drawn to approximate scale, showing the shape and dimensions of the lot to be built upon, the size and location of all buildings, or structures proposed, as well as, those that shall remain, the intended use of each building or structure, and any such other information with regard to the lot and neighboring lots, buildings and/or structures as the Zoning Officer may, in his/her discretion, deem necessary to determine and provide for the enforcement of this Zoning Law.

Type of Work: Garage Sign Driveway Sidewalk Home/Addition
 Fence Barn Porch/Deck Parking Lot Other: _____

I propose to do the following work: _____

Layout Sketch (required) Attached: Yes No Number of Sheets: _____ Value of Work: \$ _____

A Zoning Permit, issued based upon the above information, authorizes the above-listed type of work and no other. It does not relieve the designated permit holder of the responsibility of obtaining the approvals of other applicable state and county agencies.

I hereby certify that I have read, examined and understand this application and know the same to be true, correct and to the best of my knowledge.

Signature of Applicant: _____ Date: _____
Print Name/Title: _____

For Office Use Only:

Application Reviewed: Yes No By: _____ Date: _____
Application Approved: Yes No By: _____ Date: _____
Application Fee Paid: Yes No If yes, amount: \$ _____
Comments: _____