

# CONDITION COMPLIANCE CHECK FORM

CITY OF



## APPLICANT INFORMATION

APPLICANT \_\_\_\_\_ PHONE \_\_\_\_\_

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

CONTACT PERSON \_\_\_\_\_ PHONE \_\_\_\_\_

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

PROPERTY OWNER \_\_\_\_\_ PHONE \_\_\_\_\_

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

EMAIL \_\_\_\_\_

## PROJECT INFORMATION

PROJECT DESCRIPTION \_\_\_\_\_

PROJECT ADDRESS/LOCATION \_\_\_\_\_

ASSESSORS PARCEL NUMBER(S) \_\_\_\_\_

PRESENT ZONING/LAND DESIGNATION \_\_\_\_\_ EXISTING OVERLAY ZONES (IF APPLICABLE) \_\_\_\_\_

REQUEST: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

OWNER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_