

APPLICATION FOR ZONING CLEARANCE



81 W. 1st South
Snowflake, Arizona 85937
VOICE (928) 536-7103
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APPLICANT INFORMATION:

Name: _____

Company: _____

Address: _____

Primary Phone: _____ Secondary Phone: _____

E-mail: _____

LOCATION OF PROPERTY REQUESTED FOR ZONING CLEARANCE:

Address: _____

Parcel Number: _____

(parcel number is mandatory)

Nearest Major Cross Streets: _____

DESCRIBE INTENDED PROPERTY USE:

I am the legal owner of the property listed above and I approve of the intended use.

Property Owner Signature

Date

This Instrument was subscribed and sworn to and acknowledged before me on this _____ day of _____ 20____.

By: _____

My Commission Expires: _____ Notary Public: _____