

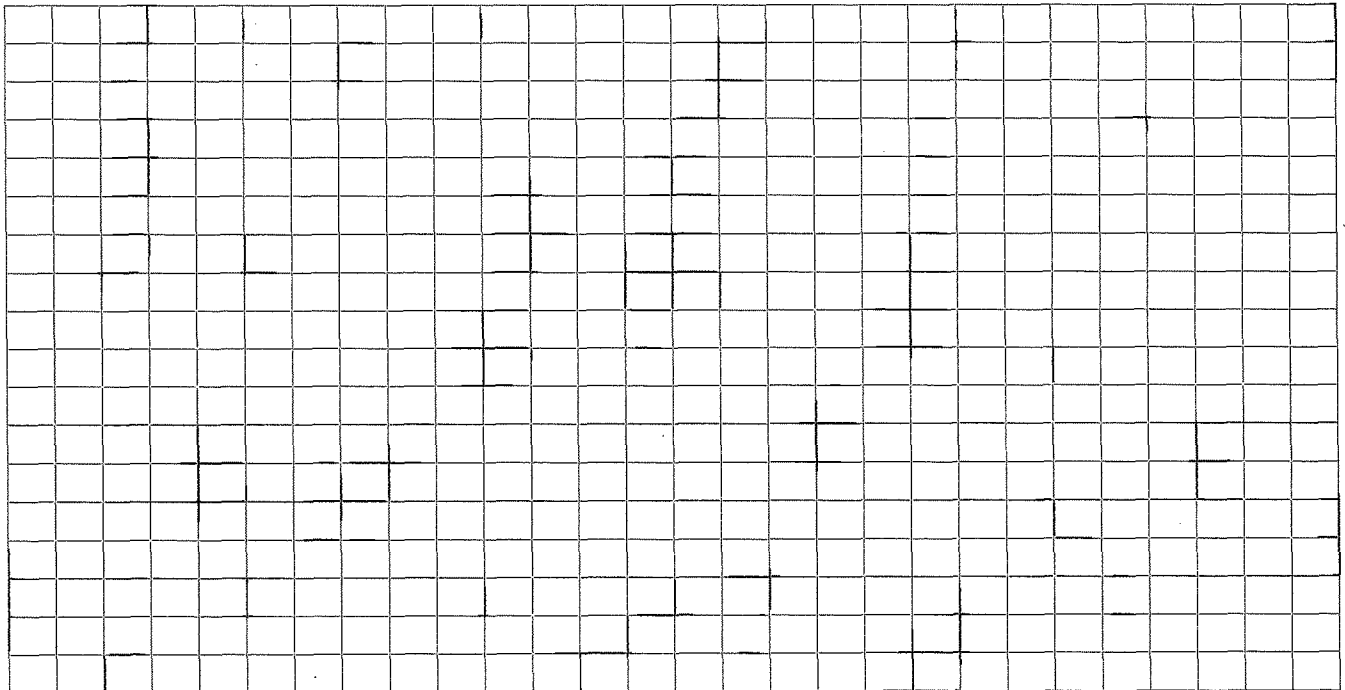
APPLICATION FOR ZONING PERMIT
New Market, Virginia

- (1) Owners Name _____ (2) Date _____
 (3) Mailing Address _____
 (4) Telephone _____ (5) Tax Map Designation _____
 (6) If purchased in last two years, give previous owners name _____
 (7) Location of Property _____
 (8) Size of Parcel _____ (9) Zoned _____
 (10) The purpose of this permit: () Building () Enlarge () Remodel () Other

(Give brief description of structure or of building activity)

- (11) Use of Structure _____
 (12) Size of Structure _____ (13) Number of Other Dwellings on Parcel _____
 (14) Number of Other Structures on Parcel _____
 (15) Building Setbacks: Front _____ Side _____ Side _____ Rear _____

Draw Site Plan Below or Attach a Copy of the Site Plan to the Application



I CERTIFY THE ABOVE INFORMATION IS TRUE AND CORRECT

Signature of Applicant _____ Date _____

Authorized Agent _____ Date _____

OFFICE USE ONLY

Approved _____ Disapproved _____

Zoning Administrator _____ Date _____

Delinquent Real Estate Taxes Owed: Yes _____ No _____ Verified By: _____

Comments _____