

# ZONING FORM FOR SITE PLAN SUBMITTAL

- Please make an appointment with a planner to have this form completed, 321-633-2070.
- Please be prepared to leave a copy of the plan and this form to retrieve at a later date.

Project Name \_\_\_\_\_ Project # \_\_\_\_\_

## Parcel I.D. and Site Address

\_\_\_\_\_  
Twp Rng Sec Sub Block Lot/Parcel

\_\_\_\_\_  
Street City State Zip Code

## Applicant Information

\_\_\_\_\_  
Name Company

\_\_\_\_\_  
Street City State Zip Code

\_\_\_\_\_  
Phone Email Address

## Owner Information

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street City State Zip Code

\_\_\_\_\_  
Proposed Use

***This form does not guarantee that a zoning action or variance will not be required for approval of your project. This form does not represent a complete review of your plans, does not establish a right to develop the property and does not constitute a waiver to any other applicable land development regulations. At the time of development, this property will be subject to all such regulations.***

**Office Use Only**

Current Zoning: \_\_\_\_\_ Zoning Resolution #(s) \_\_\_\_\_

BDP: \_\_\_\_\_

Variance: \_\_\_\_\_ Surrounding Property Zoning Classifications:  
N \_\_\_\_\_ S \_\_\_\_\_ E \_\_\_\_\_ W \_\_\_\_\_

CUP: \_\_\_\_\_

Future Land Use: \_\_\_\_\_ Joint Planning Area: \_\_\_\_\_

Permitted in existing zoning classification. Subject to section: \_\_\_\_\_

Permitted use in existing zoning classification with conditions found in section(s):  
\_\_\_\_\_  
\_\_\_\_\_

NOT PERMITTED WITHOUT A ZONING ACTION: \_\_\_\_\_

\_\_\_\_\_  
(Zoning Staff Signature)

\_\_\_\_\_  
(Date)