

Zoning Verification Letter Request

RECEIVED STAMP

Applicant

Name _____

Mailing Address _____

Phone _____ Email _____

Please send the response via: Email Mail Both

Subject Property Information

Physical Address _____

Legal Description _____

Parcel ID # _____

Request

Please attach a letter and/or provide a detailed description of your request below. Your questions regarding zoning verification shall be specific to the answers you seek.

Payment

Your request must include the required payment. Please visit <http://steamboatsprings.net/index.aspx?NID=573> for current fee schedule and payment options.

Applicant Signature Required

Signature _____

Date _____