



FEE \$10.00

ZONING COMPLIANCE APPLICATION

PLEASE PROVIDE THE FOLLOWING INFORMATION.

PROPERTY ADDRESS:						
BUSINESS OR COMPANY NAME:						
PHONE NUMBER						
APPLICANT'S NAME AND ADDRESS:						
PHONE NUMBER:						
OWNER(S)			MAIL ADDRESS		ZIP	PHONE #
PLEASE CIRCLE PROPOSED USES AND PROVIDE ADDITIONAL INFORMATION BELOW: PLEASE INDICATE THE SQUARE FOOTAGE FOR EACH USE IN THE APPLICABLE BOX:	RETAIL	OFFICE	MEDICAL	MANUFACTURER	HOME OCCUPATION	FUELING STATION
	ENCLOSED VEHICLE STORAGE	HOTEL / MOTEL	EQUIPMENT SALES	RESTAURANT	RESIDENTIAL	SMALL ANIMAL CARE
	SCHOOL	DAY CARE	PLACES OF WORSHIP	OUTDOOR STORAGE	OUTDOOR DISPLAY	INCIDENTAL STORAGE OF NONCOMBUSTIBLES
	INCIDENTAL STORAGE OF COMBUSTIBLES	INCIDENTAL STORAGE OF HAZARDOUS MATERIAL	PARKING FACILITY	VEHCILE SALES	MINOR VEHICILE REPAIR	MAJOR VEHICILE REPAIR
	WAREHOUSE STORAGE OF NONCOMBUSTIBLES	WAREHOUSE STORAGE OF COMBUSTIBLES	WAREHOUSE STORAGE OF HAZARDOUS MATERIAL	OTHER		OTHER
DESCRIBE IN DETAIL THE USE OR USES.						
WILL ALL ACTIVITIES ASSOCIATED WITH THE PROPOSED USE BE WITHIN STRUCTURE(S) OR BUILDING(S)? IF NO, DESCRIBE THE ACTIVITY. NUMBER OF EMPLOYEES _____						
NOTICE						
The undersigned owner or authorized agent of the owner of the property described herein request permission to use the property as set forth in detail above. The owner or authorized agent agrees that the use of the property will be in accordance with the City of North Liberty Zoning Code and any other local, state or federal regulations, which may apply. I hereby certify that I have read and examined this application and know the same to be true and correct. I understand that all provisions of laws and ordinances governing this property will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating the use of a property. Note: Separate applications are required for building, electrical, plumbing, heating, cooling, signs, sewer and water service.						
Signature of Authorized Agent			Date			
Signature of Owner			Date			
APPLICATION ACCEPTED BY:				DATE:		