

ZONING PERMIT APPLICATION
CITY OF CELINA, for
USE CHANGE or TEMPORARY

Permit # _____
Date filed: _____
Zoning district: _____

Existing use: _____
Proposed use: _____

Address of property: _____
Lot # and subdivision: _____
Estimated cost of improvements: _____
Owner's name: _____
Owner's address: _____
Owner's phone: _____

The applicant hereby certifies that all information on, and attached to, this application is true and correct. The applicant also declares that no part of the land involved in this application has been previously used to provide required yard space and/or lot area for another use or building. The applicant acknowledges that all construction will be in compliance with the Construction Standards of the City of Celina and all applicable building codes.

OWNER OR OWNER'S AGENT _____
SIGNATURE

In issuing this permit the City of Celina acknowledges that the building and/or the use represented herein is in compliance with the zoning regulations of the City of Celina, Codified Ordinance Sections 1141 through 1199. It is the responsibility of the property owner to make sure that the actual construction and use are as stated on this application and plan, and to assure compliance with any other applicable laws. This permit expires one year after its issuance unless construction has reached 50% of completion.

ZONING INSPECTOR _____
SIGNATURE JEFFREY HAZEL DATE

FOR OFFICIAL USE ONLY

Fee: \$20.00 Paid **BZA approval required?** Yes No
Planning Commission action:
Change of Nonconforming Use? Yes No
Abuts "R" District? Yes No Conditional Use? Yes No
Attached plan must show:
 Actual lot dimensions Building dimensions
 Minimum yard dimensions Street(s)
 Off-street parking Dimensions and location of drive(s)

Additional requirements/notes: _____

Application Review: _____
Initials
Date