

**ZONING VERIFICATION/CODE COMPLIANCE**  
*Planning & Development Services Department*

<b>OFFICE USE ONLY</b>	
RECEIPT No.: _____	FEE: \$ _____
DATE: _____	EZ FEE: \$ _____ [ ]
<b>Account No. 001-660-6680-3401 [ ]</b>	
<b>Account No. 001-660-6680-1124 (Enterprise Zone) [ ]</b>	
<b>Account No. 001-660-6680-1125 (Enterprise Zone Credit [ ]</b>	

Today's Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Daytime Phone No: \_\_\_\_\_

Form Letter Attached      Yes [ ]                      No [ ]

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Certified Cashier's Receipt:**