

Zoning Compliance

CITY OF MIDDLETOWN
MUNICIPAL BUILDING, DEKOVEN DRIVE, MIDDLETOWN, CT 06457

APPLICATION FOR ZONING COMPLIANCE

DATE _____

OWNER _____ ADDRESS _____

APPLICANT _____ ADDRESS _____
(if other than owner)

SUBJECT PROPERTY _____ ZONE _____
(Street Address)

The undersigned hereby represents that all the above statements and the statements contained in any items attached or submitted herewith are true to the best of my knowledge and belief.

Signature of Owner or Applicant

If other than owner state interest (Lessee, etc.)

Telephone No. _____

Fax No. _____

Zoning Officer's Review

Address _____	_____ Conforming Use
Map _____ Block _____ Lot _____	_____ Existing Non-Conforming Use
Zone _____ Lot Area _____ acre	_____ Illegal Use
_____	_____ No Current Zoning Violations
Brian Robinson, ZEO _____	_____ Existing Zoning Violations
Date _____	