



Fee: <u>\$125/parcel</u>
Date Rec'd: _____
Application #: _____
Meeting Date: _____

City of Flint
Planning & Zoning Department
1101 S Saginaw Street Room S105, Flint, MI 48502
Phone: (810)766-7426
www.cityofflint.com/departments/planning-and-zoning/

Application for Zoning Confirmation Letter

Property Address & Parcel ID Numbers	Property or Street Address:	
	Parcel I.D. Number(s):	
Zoning District:		

Project Description			
	Does project involve Specially Designated Merchant License, Specially Designated Distributor License, or other liquor license?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Are there any easements on the property?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant <i>(Must have a legal interest in the property)</i>	Name:			
	Firm:			
	Address:			
	City:			
	State:		Zip Code:	
	Phone:		Email:	
	<input type="checkbox"/> Own the property			
	<input type="checkbox"/> Lease the property, if so what is term of lease?		Years:	W/ options? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Have offer to purchase property (attach purchase agreement)			
	<input type="checkbox"/> Other property interest: (e.g., architect, attorney, contractor, etc.)			
	Applicant Signature:			

Primary Contact <input type="checkbox"/> Same as applicant	Name:			
	Firm:			
	Address:			
	City:			
	State:		Zip Code:	
	Phone:		Email:	
	Relationship to Applicant (e.g., architect, attorney, contractor, etc.)			
Property Owner <input type="checkbox"/> Same as applicant	Name:			
	Firm:			
	Address:			
	City:			
	State:		Zip Code:	
	Phone:		Email:	
	Relationship to Applicant (e.g., architect, attorney, contractor, etc.)			

Please note:

The non-refundable fee made payable to the City of Flint must accompany your application.

Please list any additional information you wish to be addressed by the Zoning Confirmation Letter here. Attach additional sheets if necessary.
