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Applicant Information:

## CITY OF FLINT CERTIFICATE OF ZONING COMPLIANCE

Date
Application #
Review Fee \$

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Name:	Email Address:		
Street Address:	_City:	State	Zip
Phone:	Cell:	Fax:	
Property Owner:			
Name:	Email Address:		
Street Address:	_City:	State	Zip
Phone:	Cell:	Fax:	
If the application is made by other than the application and the proposed work or oper address of the responsible officers shall b	e owner, it shall be accompanied by a duly wration is authorized by the owner. If the owner e provided.	erified affidavit of the owner c er or lessee is a corporate boo	or agent thereof that the dy, the full name and
Site Address:			
	Zoning Classification(s)		
Current use of site/structure			
Proposed Use - Type of Construct	tion/Alteration		

Please attach detailed description of proposed use and site plan.

## \*\*\*ALL OF THE ABOVE INFORMATION IS REQUIRED\*\*\*

Application must accompany 6 copies of scaled site plans meeting the requirements of the Zoning Official. In case of any false statement or misrepresentation of fact on the application or plans on which the certificate is based, any zoning compliance certificate issued thereto shall be deemed null & void.

I hereby acknowledge the above facts and those on the attached site sketch and prints to be true to the best of my knowledge and state that said construction and/or occupancy of the structure and/or site shall occur in accordance with this certificate. Further, I agree to give permission for officials of the City Of Flint to enter the property for purposes of inspection.

Signature of Applicant	Print	t/type name	Date					
Signature of Property Owner	Prin	t/type name	Date					
<u>OFFICIAL USE ONLY</u> I hereby certify that I have reviewed plans for the purpose of zoning compliance only, not for construction. Existing legal non-conformities: No / Yes :								
Zoning Compliance Certificate:	Approved	Approved as noted	Denied					
Comments / Reason for Denial:								
Zoning Official			Date					

CITY HALL 1101 S. SAGINAW STREET, ROOM S105 FLINT MICHIGAN 48502 810-766-7426 www.cityofflint.com