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CITY OF MONTE VISTA

Zoning Verification Application for Building Permit and Certificate of Occupancy

An accurate **site plan**, showing dimensions of your project and its relationship to existing structures and property lines, is required to verify zoning requirements. For zoning information and requirements see zoning summary and district requirements table

Date: ___/___/___

Property Owner: _____

Address: _____ Phone: (____) ____ - _____

Legal Description

Addition/Subdivision: _____ Block: _____ Lot: _____ Parcel: _____

Contractor Information

Name: _____

Phone: (____) ____ - _____

City License #: _____

Architect/Engineer Information

Name: _____

Phone: (____) ____ - _____

City: _____ State: _____

Description of construction, alteration, or repair: _____

ZONING INFORMATION AND REQUIREMENTS (see attached zoning summary and district requirements table)

Type of Use/Occupancy: _____

Site Zoning is: _____ Permitted use Special Review Use

	Required	Actual
Front:	_____	_____
Street Side:	_____	_____
Interior Side:	_____	_____
Rear (principle):	_____	_____
Rear (accessory):	_____	_____

Building Height

Allowed: _____ ft. Actual: _____ ft.

Distance (between principle and accessory structures): _____ ft.

Lot Coverage

Allowed: _____ ft. Actual: _____ ft. Eave Projection: _____ ft.

Minimum lot size required (dependent on zoning): _____ sq. ft. Actual: _____ sq. ft.

Setbacks in all zones are measured from the property line

Manufactured Home, Date of Manufacture: ____/____/____

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Applicant

Date: ____/____/____

Community Development Specialist Signature

Date: ____/____/____