



## ZONING VERIFICATION APPLICATION

# FEE REQUIRED: \$120.00

fees are due at the time of application submittal

**In the event two properties are requested, each will require a fee.**

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Physical Location of Property: \_\_\_\_\_

Brief legal description of property :

\_\_\_\_\_ (survey/abstract No. and Tracts; or platted Subdivision Name with Lots/Block)

Acreage: \_\_\_\_\_ Existing # of Lots/Tracts: \_\_\_\_\_ Existing Zoning: \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Street/Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

City of Wilmer has at least ten (10) business days to respond to request.

Office Use Only: Date Rec'd _____	Fees Paid: \$ _____	Check #: _____	Receipt #: _____
Zoning Verification Letter Case # _____	Accepted by: _____	Official Submittal Date: _____	