

FOR OFFICIAL USE ONLY

UPON APPLICATION SUBMITTAL,
INSERT RECEIVED DATE STAMP HERE

ZONING CONFIRMATION LETTER REQUEST FORM

The following form **must** be completed to process the request. All Zoning Confirmation letters require 10 working days for the staff to research and must be accompanied by a **\$40.00 fee**. Make checks payable to City of West Palm Beach, Planning Department. Facsimiles (faxes) will not be accepted. Additional charges for research will apply if the research requires more than 1.5 hours. Staff will contact you to advise you of the additional cost prior to performing the work. *All the requests are processed in the order received; therefore, please **do not** request that your letter be processed out of sequence.*

APPLICANT INFORMATION

APPLICANT: _____

COMPANY: _____

MAILING ADDRESS: Street Address: _____

City: _____ State: _____ Zip Code: _____

PHONE NO.: _____ FAX NO.: _____ E-MAIL: _____

PROPERTY INFORMATION

PROPERTY CONTROL NUMBER: ___ - ___ - ___ - ___ - ___ - ___ - _____

PROPERTY OWNER: _____

PROPERTY ADDRESS: _____

DEVELOPMENT/SUBDIVISION NAME: _____

TRACT/PARCEL/OR POD NUMBER: _____

GENERAL LOCATION: _____

Please attach survey, location map or general location of the property.

INFORMATION REQUESTED

(Please be specific)
