

## Application for Interpretation/ Determination

ZNR
Staff:
Due Date:

(Zoning Ordinance, Proffer Conditions, and Special Use Permit Conditions)

Fee*:	\$			

Make checks payable to PWC (\*in accordance with current Fee Schedule)

Date	
Stamp	

	Name	Title					
Applicant	Mailing Address	City/State		Zip Code			
Information	Email	Phone					
	Check one: Property Owner Authorized Agent of Property Owner Other:						
Property	Address	City/State		Zip Code			
Information							
Type of Inquiry	Interpretation/Determination of Zoning Ordinance – Part of Section #  Interpretation/Determination of proffers – Rezoning case #  Interpretation/Determination of special use permit conditions – SUP case #						
	interpretation/ Determination of special use permit conditions – 30F Case #						

## **Minimum Submission Checklist**

Completed standard application form
Request letter signed by applicant
Supporting Documents
Processing fee in accordance with current fee schedule

Applicant Signature	Date