

# ADVISORY PLAN COMMISSION

## ZONING CERTIFICATION LETTER REQUEST



61 N. Green Street | Brownsburg, IN 46112

Phone 317-852-1128 | Fax 317-852-1134

www.brownsburg.org

APPLICATION FEE:	RECIPT #:	RECEIVED STAMP
------------------	-----------	----------------

**COMPLETE THE FOLLOWING:**

<b>Applicant:</b>	Company:		
	Name:	Email:	
	Address:	City, State	Zip code:
	Phone #:	Cell #:	Fax #:
Applicant is (Check one):	<input type="checkbox"/> Sole Owner <input type="checkbox"/> Joint Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Agent <input type="checkbox"/> Other (Specify): _____		

<b>Project Information:</b>	Property Address:		
	Subdivision Name:		
	Property Type:	<input type="checkbox"/> Residential <input type="checkbox"/> Nonresidential <input type="checkbox"/> Mixed Use	
	Parcel Numbers:		

**Special Instructions:**

Zoning Certification Letter Requests will be processed within four (4) businesses days after receipt of this application and a \$62.50 processing fee. A separate application and fee is required for each parcel.

**Forms of Payment:**

We accept Visa, MasterCard, Discover, Check and Cash

**What is included in a Zoning Certification Letter?**

Current Zoning and Use of the subject property; current Flood Insurance Rate Map status; copy of the most current Certificate of Occupancy/Completion (if available); zoning classification of surrounding properties; special exception and variance approvals and previous zoning history (if available).

  
  
  

_____	_____	_____
Signature of Applicant	Printed Name	Date