

Zoning Permit Application



Grayson County, Virginia

Zoning Request: Permit _____ Variance _____ Special Use _____ Rezone _____

Applicant Name			
Mailing Address			
City, State, Zip			
Phone	Work () -	Home () -	
Property Owner			
Mailing Address			
City, State, Zip			
Phone			
Tax Map Number			
Present Zoning			
Total Acreage			
Was this Property acquired prior to December 8, 1998?		Yes	No
Has this property been subdivided from another parcel since December 8, 1998?		Yes	No
District Parcel is Located In:			
Applicant Request			

Please use the space provided below to draw a layout of your property and buildings including setback distances.

I certify that all information given in this application is true and correct to the best of my belief and knowledge.

Date: _____ Signature (Property Owner): _____

OFFICE USE ONLY	
<i>COMMENTS: * Approval of this permit is on the condition that the information provided on this application does not change</i>	Approval Date: _____
Permit Number _____	Zoning Administrator: _____

It is the recommendation of the Grayson County Planning Commission that this request be approved denied.

_____, Chairperson

