



City of Semmes

Zoning Verification Request

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Site Information

Property Address \_\_\_\_\_

\*Parcel No.: \_\_\_\_\_

\*Key: \_\_\_\_\_

\*Parcel or Key information must be completed

Proposed Use: \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

Date

\*Please be advised that this zoning verification is for informational purposes only. Specific uses for the zoning classification should be verified through the City of Semmes Zoning Ordinance and associated maps or through consultation with the Planning and Zoning Department staff at (251) 649-5752.

Office Use Only

Case No.: \_\_\_\_\_ Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Outside Municipal Limits     Zoned    Zoning: \_\_\_\_\_

Permitted Use     Not Permitted Use

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_