



# Legal Nonconforming Status Permit

Application for Two-year Permit



### PROPERTY OWNER INFORMATION

Name: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Daytime Telephone: \_\_\_\_\_ e-mail address: \_\_\_\_\_

### SITE INFORMATION

Address of Site: \_\_\_\_\_ Assessor's Parcel No: \_\_\_\_\_  
Name of Business at Site: \_\_\_\_\_  
Hours and Days of Operation: \_\_\_\_\_  
Type of Vehicular Traffic/Deliveries \_\_\_\_\_  
Traffic Frequency (trips per day) \_\_\_\_\_  
  
Detailed Description of Present Use: \_\_\_\_\_  
  
Date Use was established \_\_\_\_\_ Zoning When Use was established: \_\_\_\_\_  
Date Lot was created \_\_\_\_\_ Date Purchased by current owner \_\_\_\_\_  
Date structure was constructed \_\_\_\_\_ Date of other construction \_\_\_\_\_  
  
Business size at time of rezoning: \_\_\_\_\_  
Lot Size \_\_\_\_\_ Paved Area (sq. ft.) \_\_\_\_\_  
Building Area (sq. ft.) \_\_\_\_\_ Parking Capacity (spaces) \_\_\_\_\_

### SUPPORTING INFORMATION

It is the applicant's responsibility to submit evidence of the lawful existence and continued use of the activity or structure by providing the following types of information, including documentation of the date that the use/activity commenced and evidence of continuous operation:  
Tax Records and Deeds applicable to the property; Lease agreements containing descriptions of the property uses;  
Plats/Plans; Dated photographs; Licenses; Bills or receipts, including bills from utility companies;  
Sketch or plan indicating area occupied by structure and/or use; Sworn affidavits from persons with knowledge of the use

### CERTIFICATION

I hereby certify that I am the owner in fee or the authorized agent of the owner in fee of the property upon which this application is made and that all information provided by me is accurate, true and correct to the best of my knowledge and belief.  
Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submission of this application does not imply approval of the nonconforming use. The Zoning Administrator will make a determination based on the information provided by the applicant and/or other information.

### APPROVAL STATUS - OFFICE USE ONLY

Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_  
DENIED  Signature of Zoning Administrator \_\_\_\_\_ Date Denied \_\_\_\_\_  
APPROVED  Signature of Zoning Administrator \_\_\_\_\_ Date Approved \_\_\_\_\_

If approved, this Legal Nonconforming Status Permit shall be valid for a period of two years from the above date of approval, provided said use and/or intensity of use does not change and conditions listed below remain in force.

Conditions: \_\_\_\_\_