Permit #	Permit #	
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## Zoning Permit Application Sign Off for a House Addition Interior Renovations and or within the foot print of an existing deck

(Please Print or Type All Information and Attach Additional Pages as Needed)

		Date:		
Applicant's Name:				
	(last)	(first)	(middle initial)	
Mailing Address:	<del></del>			
Talanhana	(number)	(road)	(town)	
Telephone:	(day)	(evening)	(cell)	
Agent's Name:	(uay)	(CVCIIIIg)	(cen)	
	(last)	(first)	(middle initial)	
Mailing Address:	<del></del>			
Tolonhonou	(number)	(road)	(town)	
Telephone:	(day)	(evening)	(cell)	
Property Owner's Name:	(ddy)	(CVCIIIIg)	(0011)	
	(last)	(first)	(middle initial)	
Mailing Address:				
Tolophono	(number)	(road)	(town)	
Telephone:	(day)	(evening)	(cell)	
Subject Property Address:				
Zone: Assessor's Map #:		p #:	Lot #:	
Size of Interior Renovation: Length:		Width:	Square Feet:	
Proposed Use of Interior Re	novation:			

Please complete and attach a Floor Plan of the proposed interior renovations with dimensions. Interior Renovations to create an Accessory Living Unit (In- law apartment) or a Home Office will require different Zoning Applications.

\*\*\*\* By my signing this application I agree that my/this house interior renovation will meet <u>all</u> required zoning regulations for property line setbacks, size and height limitations and any other regulations that would apply.

Applicant/Agent Signature	Owner Signature
PLO	T PLAN
Plot Plan must be drawn in the box below or attac	hed to this Application.
In compliance with the Zoning Regulations pleas distances to property lines, main residence, well a	e show the location of the proposed structure giving nd septic system.
Any change from this drawing or plan must be chand Use Inspector.	necked with the Planning & Zoning Commission or the
Remarks:	