

Request for Zoning Determination

General: basic zone district information**Specific:** information related to the property (fee applies)

Date: _____

Address of Property: _____

Parcel Number: _____

Requested by: Name: _____ Address: _____

Email Address: _____ Phone Number: _____

Specify: Owner Buyer Realtor Contractor Other _____

Present use of Property: _____

Proposed use of Property: _____

FOR OFFICE USE ONLY

Zone District: _____ Date of Determination: _____

Applicable Code Section: _____

Property Assessed as: _____

Disposition: _____

Comments (phone requests, etc): _____

Determination by: _____

Please return to Community & Neighborhood Services - 3rd floor - City HallFax: (616) 546-7058 | Email: cns@cityofholland.com