

## Town of Danbury Application for Zoning Compliance Permit

<u>Applicant Information</u>	
Applicant Name:	Contact Name:
Mailing Address:	Other Information:
City, State, Zip:	
Telephone: (    )	Fax Number: (    )

<u>Property Information</u>		
Street Address:	Directions to Property:	
City, State, Zip:		
Tax Map No:	Tax Block No:	Tax Lot No:

<u>Proposed Use</u>
Proposed Use: ( Attach Plans and Additional Information if Necessary)
Comments: ( Attach Additional Information if Necessary)

<u>Certification of Applicant</u>	
<p>I attest that the above information is correct to the best of my knowledge. I have read and am aware of all conditions that apply. I understand any falsification or errors will render the zoning compliance permit invalid and subject the applicant to a zoning violation. I understand that the zoning compliance certificate does not constitute a septic tank, well, building, or any other permit. I understand the Zoning Compliance Certificate is valid for ninety (90) days after the date of the issuance of the Zoning Compliance Certificate.</p>	
Date of Application: _____	Signature(s) of Applicant(s): _____