



ZONING PERMIT APPLICATION

Office Use Only

Date Sent _____

CUP Application No _____ Final Dev. Plan No _____

BOCC Resolution No _____ Building Permit No _____

Applicant/Project Name _____ Map # _____

PROPERTY INFORMATION

Site Address _____

Use _____

APPLICANT INFORMATION

Applicant Name _____

Company Name _____

Address _____

City/State/Zip _____

Contact Person _____

Telephone No. _____ Email: _____

I, the undersigned, am the (*Circle One*) owner / duly-authorized-agent of the aforementioned property situated in the unincorporated portion of Johnson County, Kansas. By execution of my signature, I do hereby officially apply for Zoning Permit Approval.

Signature: _____ Date: _____