



## **ZONING VERIFICATION APPLICATION**

TO SUBMIT APPLICATION ONLINE VISIT WWW.MGOCONNECT.ORG/CP/PORTAL

OFFICE USE ONLY	
Docket No:	Date Requested:
Parcel #:	Zoning District:
Council District / At Large:	Flood Zone:
Lot, Sq., Sub:	Historic District: Y / N Design Rev Corridor: Y / N
APPLICATION FOR:   ZONING DISTRICT DETERMINATION	☐ DETERMINATION OF A LEGAL NON-CONFORMING USE
APPLICANT INFORMATION	
Name:	
Mailing Address:	
Phone: Email:	
PROPERTY INFORMATION	
Address:	
Subdivision:	
Square No.: Lot No.:	Street No.:
Property Size (square feet):	Zoning District:
SUBMITTAL REQUIREMENTS	
☐ Completed and signed application.	
☐ Payment of fees: \$20 per request, plus a \$10 technological plus a \$1	gy fee charged on all applications.
$\square$ Any additional information necessary to determine sta	atus of a legal non-conforming use including but not limited
to utility bills, appraisals, deeds, surveys, etc.	
NOTE: St. John the Baptist Parish has not examined nor reviewed the title of any portion property. Any action of the Parish in this matter does not: (1) imply that the applicant's time restrictions on said property, or (3) that any restrictive covenants or restrictions that may be on	tle or ownership is valid, (2) that there are or are not any restrictive covenants or other
NOTE: Within sixty (60) days of submission of minimum application requirements, this agrees and understand that all permit fees are non-refundable.	s application will become null and void. By signature of this application, the applicant
Applicant's Signature	Date