

INITIAL CERTIFICATE OF ZONING COMPLIANCE

City of Pinckneyville
104 South Walnut Street
Pinckneyville, Illinois

Date:
Initial Certificate of Zoning Compliance Number:
Zoning District:

Applicant Information

Name:
Address:
Address for which Compliance is sought:
Phone:

Property Owner(s) Information (if other than applicant)

Name: _____
Address: _____
Phone: _____

Building Permit Required	Yes/No
Entrance Permit Required	Yes/No
Septic Tank Permit Required	Yes/No
911 Address	Yes/No
100 Year Flood Plain	Yes/No

This Initial Certificate of Zoning Compliance constitutes the Initial Certificate of Zoning Compliance as described in article 4, Sections 4-1 thru 5 of the Pinckneyville Zoning Ordinance and is *valid for one (1) year* from the date of issuance, unless it is extended pursuant to Article 4, Section 4-4 of the Pinckneyville Zoning Ordinance. A Final Certificate of Zoning Compliance is required as described in Article 4, Section 4-6

Please provide and attach a brief description and graphic drawing of the proposed improvement to property noting:

1. Structure location and use
2. Relationship to adjacent lots (measurement to lot lines)
3. Area & dimensions including height and setbacks
4. Number and size of proposed dwelling units
5. Location & number of parking/loading spaces
6. Identification of Utilities (public & private)

The Pinckneyville Zoning Administrator has verified that the application is properly completed. A fee in the amount of \$25.00 is required for the Initial Certificate of Zoning Compliance if the action requires a building permit.

Pinckneyville Zoning Administrator Signature

Date Fee Paid _____

Applicant Signature