

| |
|-------------------|
| Date filed: _____ |
| Property: _____ |

Zoning Verification Application

Step 1 to open a new business: Submit this Zoning Verification Application to the Planning Department team at the City of Eastpointe's Building Department. E-mail: planningandzoning@eastpointecity.org. Note, if you move forward with a Business License and Certificate of Compliance Application, you must show proof of property ownership or approval by the property owner.

| Applicant Information | |
|-----------------------|--------|
| Name | |
| Phone | E-mail |

| Property Information | |
|---|-----------------------------------|
| Address | Parcel ID # |
| Current use (what business occupied the building previously?) | |
| Proposed use (what type of business activity are you engaging in?) | |
| Number of employees (on largest shift) | Hours and days of operation |
| Total occupancy at one time | Number of parking spaces provided |
| Description of any proposed renovations or improvements | |
| Is there a dumpster enclosure on the property? <u>See ordinance Section 50-236.</u> | |
| Is there a masonry wall between commercial and residential property? <u>See ordinance Section 50-231.</u> | |
| Is there screening between parking lots, alleys, and public right-of-ways? <u>See ordinance Section 50-234.</u> | |

| Signature | |
|---|-------|
| I hereby attest that the above information is accurate and complete. I am authorized to and grant permission to the City of Eastpointe to access the subject property for the purposes of preparing staff reports and/or evaluating this application. I understand that all building, electrical, plumbing and fire codes must be met prior to occupancy. I agree to comply with all provisions of the City Code and State Law. | |
| Applicant Signature: | Date: |
| Print Name: | |

FOR OFFICE USE ONLY

| Building / Planning Department | | |
|--|-----------------------------------|---------------------------------------|
| Zoning District: | <input type="checkbox"/> Approved | <input type="checkbox"/> Not Approved |
| Comments | | |
| Additional requirements (e.g. Site Plan Review, Special Land Use Review, Variance) | | |
| Staff name | | |
| Review date | | |