

Town of Apple Valley Zoning Verification or Rebuild Letter



FOR TOWN USE ONLY			
Date Submitted:	Case No.:	Received By:	
Planning Fee:	Other Fees:	Case Planner:	
APPLICATION PROCESSING I	EES:		
Planning Division Review Fe	е	Initial <u>Deposit</u> \$194.00	Fee \$194.00
APPLICANT INFORMATION Applicant		Contact Person	
Mailing Address	City	State	Zip
Telephone	Fax	FaxEmail	
PROPERTY INFORMATION- PA	ease type or print legibly	ı in ink	
Assessor's Parcel No(s)			
Site Address:			

INFORMATION REQUESTED

Please list information to be addressed in the letter (zoning, general plan rebuild, etc.):