



CITY OF MASCOTTE
ZONING INQUIRY

You have received this form because your project presents certain challenges where determining compliance with the Land Development Codes (LDR's) requires the assistance of the Planner. The fee for this service is not covered by the City of Mascotte fee schedule and must be handled on a case-by-case basis. The purpose of this form is so the Planner can provide you with an estimate of the cost of the Zoning Clearance. Please fill out this form and deliver it along with your project information (plans, surveys etc.) to the City Clerk. The City Clerk will then forward your information to the Planner for an estimate.

Project Address/Job Location: _____

Property Owner Name: _____ Email Address: _____

Phone Number: _____ Property Alt Key Number: _____

Brief Description of the work planned: _____

Click Gray Box To Email This Form

OFFICE USE ONLY

DATE SENT TO PLANNER: _____

DATE RETURNED: _____

PLANNER COMMENTS: _____
