



Document Request Form

LOCATION	APPLICANT INFORMATION
Business Name _____	Name _____
Street Address _____	Street Address _____
City, State, Zip _____	City, State, Zip _____
Subdivision/Shopping Center _____	Phone Number _____
CLT _____ Zoning District _____	Email _____

SELECT REASON FOR REQUEST	OFFICE USE ONLY:
<input type="checkbox"/> Beer Board <input type="checkbox"/> Building Letter (C.O., C.C., Violations) \$50 Per Address ** <input type="checkbox"/> Zoning Letter (Explain Below) \$50 Per Address *** <input type="checkbox"/> Other (Explain Below): B&W 15¢ per Page / Color 50¢ per Page	MS # _____ IC# _____ Bldg Insp _____

PROPERTY USE DETAILS
<p>**If Building Letter was issued prior to 2000, please provide a date range. Info beyond 1988 may not be accessible.</p> <p>*** If Zoning Letter, please provide proposed use of the property.</p>

APPLICANT'S SIGNATURE _____ DATE _____