

Certificate No. _____

Date: _____

LYON COUNTY ZONING CERTIFICATE OF COMPLIANCE

The undersigned hereby applies for a Certificate of Compliance to occupy and use the premises as follows:

Legal description of the property:

Approved use of premises: _____

I hereby certify that I have the legal authority to file this application, that I have completed and examined this application and know the same to be true and correct. I further certify that all provisions of law and other regulations governing the type of construction and use proposed in this application have been complied with, whether or not specified in this application.

A Certificate of Compliance, once issued, shall remain in effect so long as the use of the land, buildings and structures are used in accordance with said Certificate.

Name of Owner/Applicant:	Site address:
Mailing Address:	Phone:
EMAIL:	S-T-R:
Present Zoning:	Acres:
Flood Zone:	Current Use:
_____	_____
(Signature of Applicant)	Date

This section to be completed by Zoning Administrator

This certificate of compliance is related to permit/application no. _____ and dated _____.

- If proposed occupancy is a change of use where no new building or additions are proposed and no zoning permit is needed, said building and use will comply with all setback distances, water/sewage disposal requirements, parking/sign regulations and other applicable zoning regulations. YES NO N/A
- If proposed occupancy is a change of use where a new building or addition is proposed and a zoning permit is needed, said building and use will comply with all setback distances, water/sewage disposal requirements, parking/sign regulations and other applicable zoning regulations. YES NO N/A
- Has building permit been issued, and if so, building and proposed use complies with all conditions of approval? YES NO N/A
- If use required a Conditional Use approval, building/use complies with all conditions of approval. YES NO N/A
- If use required approval of a Variance by the Board of Adjustment, such use complies with all conditions of approval of the approved variance. YES NO N/A
- Site inspected on _____ to verify compliance with all applicable conditions.

Inspector's comments;

Certificate of Compliance issued on _____ by _____ Zoning Administrator

Subscribed and sworn to before me this.

Notary Public