



MONTGOMERY COUNTY, VIRGINIA ZONING VERIFICATION LETTER

Please fill in all fields and email or fax to Montgomery County Planning & GIS Services

Applicant Name:	<input type="text"/>	Contact Phone or Email:	<input type="text"/>
Mailing Address:	<input type="text"/>		
Location of Property or 911 Address:	<input type="text"/>		
Current Owner:	<input type="text"/>	Previous Owner:	<input type="text"/>
Tax Map #:	<input type="text"/>	Parcel ID #:	<input type="text"/>
		Zoning District:	<input type="text"/>
Parcel size:	<input type="text"/> acres	Number of Existing Dwelling Units:	<input type="text"/>
Optional Project Description:	<input type="text"/>		
PROPOSED CONSTRUCTION:	Manufactured Dwelling:		
Single Family Dwelling:	<input type="checkbox"/> Class A(Doublewide, etc. 2+ section)		
<input type="checkbox"/> Stickbuilt	<input type="checkbox"/> Class B (Singlewide 1 section)		
<input type="checkbox"/> Modular	<input type="checkbox"/> Replacement of existing dwelling		
<input type="checkbox"/> Other Construction (If checked, please describe):	<input type="checkbox"/> Accessory Structure		
<input type="text"/>	<input type="checkbox"/> Additional		

CERTIFICATION:

I certify that the information given is correct. I further understand zoning verification expires in 12 months.

Applicant's Signature

Date