FOR OFFICE USE ONLY



CITY OF WEST PARK ZONING USE REVIEW

PLANNING AND ZONING DEPARTMENT City of West Park, 1965 South State Road 7, West Park, Florida 33023

planning@cityofwestpark.org

This Zoning Use Review process **only** applies to the use permitted for the parcel listed below in accordance with the City's Code. Please note final Certificate of Use approval will be subject to all required reviews and inspections conducted during the Certificate of Use review process. Forms can be submitted in person or via email.

Please note, completion of all of the fields below are mandatory for submittal.

Applicant Information:		
First Name:	Last Name:	Date:
Mobile Phone No.:	E-mail Address:	
Applicant's Signature:		
Business and Location Information	n:	
Business Name:		
	S	
Property Address (if different):	F	Folio #:
Prior Business Use/Name (at parce	el or bay):	
	all intended uses for the property	
	(FOR OFFICE USE ONLY)	
Zoning District:	Future Land Use Ca	ategory:
-		
Proposed Use is Permitted as a premises. If the use is permitted	pplicant may apply for the "Certificate of Use" and S. an Accessory Use ONLY: (An "Accessory Use" is Cu d as an "Accessory Use", please review the definitic he principal or main permitted use on the application	ustomarily Subordinate to the Main Use of the on of "accessory use" prior to applying for a
Proposed Use is Conditionally to the conditions and limitations	<u>Permitted</u>: (Subject to specific conditions or limitan below or attached prior to proceeding with the Cert	tions specified below. <u>Please review and agree</u> tificate of Use process).
	a Special Exception: (<u>STOP</u> - If the use requires a " Ocityofwestpark.org for further Special Exception app	
Proposed Use is NOT Permitte	ed: (STOP - You May <u>Not</u> Apply for a Certificate of U	Ise).
Reviewer Signature:	Date:	
✓ If requested, a copy of the 0	ns will be reviewed following submission of a Ce City's Permitted Use Table will be provided. of Use" is required; additional permitting review	