VILLAGE OF DECATUR ZONING COMPLIANCE

PERMIT # _____ DATED:_____

To: Decatur Village Clerk: I the undersigned do hereby apply for approval to:

Erect _____ Alter_____ Move _____ Set _____ Demolish _____

Tax ID # 80-43-_____ Lot: _____

Size of Property: _____ Size of Structure: _____

Cost of structure: _____ Zoning Category: _____

Type of structure: ___Residential ____ Central Business ____ Commercial ____Industrial

Set back requirements: Front: _____ Back: _____ Side: _____

Any other requested information: _____

Print Applicant's Name _____ Contact phone # _____

Site Address _____

Print Land Owner's Name _____ Contact phone # _____

I further certify that uses of the land and the building or structure shall comply with the provisions of the Village of Decatur Ordinances as applicable and any other applicable laws and requirements pertaining thereto.

If this permit is to replace an existing structure, the old (or existing) structure must be removed within 30 days of final inspection of the new structure. I also understand that my permit may be revoked after issued by the Zoning Administrator for non-compliance. This permit is valid for 6 months from date of approval.

Are there any opposition to this permit from contiguous property owners or owners of dwellings within 300 feet? _____yes _____no

Signature of applicant/owner: _____ Date: _____

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