



City of Mills
704 Fourth Street / PO Box 789
Mills, WY, 82644
307-234-6679

Permit # _____

Zoning # _____

Zoning Certificate Application

PROPERTY ADDRESS:			
SUBDIVISION/ADDITION:		BLOCK:	LOT:
SECTION:	TOWNSHIP:		RANGE:
2. OWNER INFORMATION: Name: _____		3. CONTRACTORS INFORMATION: LICENSE# _____ Name: _____	
ADDRESS: _____		ADDRESS: _____	
TELEPHONE: _____		TELEPHONE: _____	
RESIDENTIAL	CHECK ALL THAT APPLY:		
	<input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> SINGLE-FAMILY <input type="checkbox"/> MULTI-FAMILY <input type="checkbox"/> ADDITION <input type="checkbox"/> REMODEL		
	<input type="checkbox"/> ATTACHED GARAGE <input type="checkbox"/> DETACHED GARAGE <input type="checkbox"/> PATIO COVERS <input type="checkbox"/> CAR PORT <input type="checkbox"/> SHED		
	<input type="checkbox"/> DECKS/PORCHES <input type="checkbox"/> FENCE (Material: _____; Height: _____)		
	<input type="checkbox"/> OTHER _____ TOTAL SQUARE FOOTAGE _____		
COMMERCIAL	CHECK ALL THAT APPLY:		
	<input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> NEW USE <input type="checkbox"/> REMODEL <input type="checkbox"/> ADDITION <input type="checkbox"/> MULTI-FAMILY		
	<input type="checkbox"/> OUT BUILDING <input type="checkbox"/> FREE STANDING SIGN <input type="checkbox"/> TEMPORARY SIGN <input type="checkbox"/> WALL SIGN		
	<input type="checkbox"/> PATIO COVERS <input type="checkbox"/> FENCE (Material: _____; Height: _____)		
	<input type="checkbox"/> OTHER _____ TOTAL SQUARE FOOTAGE _____		
List all existing structures, including size, on the subject parcel :			
Explain use/project in detail (Residence type, business name, type of business, materials to be stored, etc.)			
BUILDING SETBACKS			
FRONT: _____ REAR: _____ SIDE YARD: _____ CORNER: _____ CORNER LOT STREET SIDE: _____			
ZONING REQUIREMENTS			
FLOOD PLAIN DESIGNATION (100, 500, 1,000, NONE...): _____ ZONING DISTRICT: _____			
MAXIMUM HEIGHT: _____ MINIMUM LOT SIZE: _____ MINIMUM OPEN SPACE: _____			
REQUIRED PARKING: _____ REQUIRED LANDSCAPING: _____ OTHER: _____			
WATER: <input type="checkbox"/> YES <input type="checkbox"/> NO SEWER: <input type="checkbox"/> YES <input type="checkbox"/> NO FIRE HYDRANT WITHIN 500': <input type="checkbox"/> YES <input type="checkbox"/> NO			

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a zoning certificate does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Authorized Agent: _____

Date: _____

Comments, Conditions, Restrictions: _____

Approvals

City Planner: _____ Building Inspector: _____

City Administrator: _____