

Certification of Zoning

REQUEST

To Be Issued To: _____

Date of Request: _____ Fee Paid

Certification Requested By:

Name: _____

Address: _____

Phone: _____ Fax: _____

Location of Subject Property:

Physical Address: _____

Tax Parcel ID Number: _____ City Block Number (City only): _____

General Location Description: _____

Name of business (if applicable): _____

ZONING CERTIFICATION

The Current Zoning of Property as identified above is: _____

The following uses are permitted in the above referenced zone:

Real Estate Offices Automobile Sales Truck Sales

Other: _____

Additional Comments: _____

A copy of this form will be sent to the Knoxville Beer Board.

To the best of my knowledge and belief, our zoning map is accurate with respect to the subject property. If further certification of zoning is a significant issue, however, it is suggested that you or your attorney search the public record located in the office of the Knoxville City Recorder, City County Building, 400 Main Street, Knoxville, TN (if parcel is in the City) or in the office of the Knox County Clerk, 300 Main Street, Knoxville, TN (if parcel is in the County).

Certified by MPC Staff: _____ Date: _____