

**CITY OF GRANGER**  
**Application for Certificate of Zoning Compliance**

No building or other structures shall be erected, moved, added to, or structurally altered without a Certificate of Zoning Compliance issued by the Zoning Administrator.

Owner Name _____	Agent Name _____
Address _____	Address _____
City, State _____	City, State _____
Telephone _____	Telephone _____
Legal Description or Address of Property _____	
Proposed Use of Improvements _____	
Zoning District _____	
Attach a building plan with the following information:	

1. Property boundary line, dimension and area.
2. Location, size, shape of proposed new or altered building.
3. Location, size, shape of existing building structure.
4. Total square feet of proposed building and existing building.
5. Location of existing utilities, right-of-ways, and easements.
6. Number of household or rental units any existing and proposed building is designed to accommodate.

Owner/Agent _____	Date _____
Signature	
Received by _____	Fee _____
City Clerk	

Upon review, a Conditional Certificate of Zoning Compliance is hereby:  <input type="checkbox"/> Granted <input type="checkbox"/> Denied  Date _____  Reason for Denial: _____  _____  _____ Granger Zoning Administrator	Upon review, a Conditional Certificate of Zoning Compliance is hereby:  <input type="checkbox"/> Granted <input type="checkbox"/> Denied  Date _____  Reason for Denial: _____  _____  _____ Granger Zoning Administrator
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