



# Fairbanks North Star Borough Department of Community Planning

P.O. Box 71267  
Fairbanks, Alaska 99707-1267  
(907) 459-1260 Fax: (907) 459-1255  
planning@co.fairbanks.ak.us

## ZONING PERMIT APPLICATION

<b>APPLICANT:</b>	
Name:	
Mailing Address:	
Phone:	
Fax:	
E-mail:	

<b>Property Information:</b>	
Legal Description:	
Street Address:	Lot Size: <input type="checkbox"/> acres <input type="checkbox"/> square feet
Parcel Account Numbers (PAN):	
Existing Use & Structures	

<b>Proposed Use/Construction:</b>			<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial
Description of proposed use:					
If commercial, include number of employees, seating capacity, net sales/office sq. ft.					
Number of existing dwelling units:	Number of proposed dwelling units:	Total Number of dwelling units:			
Size of existing construction in square feet:	Size of proposed construction in square feet:	Building height/number of stories:			
Estimated cost of new construction:			Number of Bedrooms:		

I certify that  (I am)  (I am authorized to act for) the owner of the property.  
 I certify that the information included in this application is to the best of my knowledge true and complete.  
 I understand that processing of this application may take up to 5 working days.  
 I have attached a detailed site plan, drawn to scale, in compliance with the guidelines document titled "Site Plans" and the drawing is no larger than 11" x 17".  
 I understand that the Zoning Permit is appealable and that said appeal must be submitted and perfected within 15 days of the date of the decision in accordance with 18.54.070.  
 I can be notified of the decision at the above  (phone number)  (address).

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_