



# CITY OF WEST PARK

## ZONING USE REVIEW

PLANNING AND ZONING DEPARTMENT

City of West Park, 1965 South State Road 7, West Park, Florida 33023

[Request\\_for\\_zoning\\_review@cityofwestpark.org](mailto:Request_for_zoning_review@cityofwestpark.org)

Forms can be submitted in person or via email.

### Applicant Information:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mobile Phone No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Address: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

### Subject Property/Business Location Information:

Property Address: \_\_\_\_\_

Folio Number/Property ID: \_\_\_\_\_

Provide a detailed description of all intended uses for the property.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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### OFFICE USE ONLY

Zoning District: \_\_\_\_\_

Description of Use Per Section 42-431: \_\_\_\_\_

- Proposed Use is Permitted
- Proposed Use is NOT Permitted
- Proposed Use is Conditionally Permitted *(Subject to Specific Limitations)*
- Proposed Use is Permitted as a Special Exception *(Permitted in Zoning Districts Subject to the Approval of the City Commission)*
- Proposed Use is Permitted as an Accessory Use ONLY *(Customarily Subordinate to the Main Use of the Premises)*

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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\*If you are planning to open a business at the property that you are requesting information for, you will be required to obtain an approval of a Certificate of Use with this form attached.

\*Parking requirements will be reviewed upon application of a Certificate of Use.

\*A permitted uses table will be attached to this form as well applications for a Conditional or Special Exception use.