



Department of Community Development
County of King William
180 Horse Landing Rd., #4
King William, VA 23086
Telephone: (804) 769-4969 Fax: (804) 769-4964

Request for Zoning Verification

Property for Which Zoning Verification is Requested:			
Tax Map No.:		Street Address:	
Zoning Verification Requested by:			
Name/Company:			
Address:			
City, State, Zip Code:			
Telephone:		Fax:	
e-mail:			
Person to Whom Zoning Verification Should be Addressed (If different from requestor):			
Name/Company:			
Address:			
City, State, Zip Code:			
e-mail:			
Full Explanation of Request (attach additional sheets if necessary)			
<ul style="list-style-type: none">Specify specific zoning issues the letter is to address.If the request includes determination of compliance of existing development with current zoning regulations, current survey or as built plan must be provided with the application including sufficient detail to evaluate the development.			
Unless specifically requested otherwise, the zoning verification letter will be sent electronically as a .pdf to the e-mail addresses provided. If applicable, check the appropriate boxes below.			
<input type="checkbox"/> Mail original letter to requestor			
<input type="checkbox"/> Mail original letter to addressee			
<input type="checkbox"/> Mail original letter to Requestor and copy to addressee			
<input type="checkbox"/> Mail original letter to addressee and copy to requestor			
I understand that any request for a written zoning verification must be accompanied by a check in the amount of \$150.00, made payable to <i>Treasurer, King William County</i> . I also understand that the Zoning Administrator, or designee, will complete my request within 30 business days from the date this request and required fee are received in the Department of Community Development.			
Signature of Requestor: _____		Date: _____	
Office use only	Date Received:		Date Due: