

Date Received: _____ Received By: _____

Business Conformance Zoning Review



PROPOSAL (To Be Completed by Applicant)

This form is for a preliminary review of a proposed use for conformance to zoning. It is important that the description of your proposed business is comprehensive in scope. Home based: Commercial:

Fee \$25 – cash or check; payable to City of Covington when you return this form. Online pay is available.

Name of Applicant/Business Owner: _____

Email Address: _____ Phone Number: _____

Description of Existing/Previous Business (if known): _____

Name of Business: _____

Business Location Address: _____ NAICS Code: _____

Description of Proposed Business: _____

Hours of Operation: _____ Delivery on a daily basis: Yes No

Number of employees: _____ Number of Commercial Vehicles to be parked on-site: _____

Are all business activities conducted on-site? If not, please explain: _____

Applicant/Business Owner Signature: _____ **Date:** _____

For Office Use Only

Zoning District: _____ Use _____

Parcel ID: _____ Approval: Denial: SUP Required:

Verified By: _____ Date _____

Comments: _____

Zoning #: _____ Compliance inspection scheduled: _____ Utility release: _____