

TOWN OF LAGRANGE
ZONING COMPLIANCE WORKSHEET

ZONING
RESIDENTIAL

Instructions: Applicant Completes Sections A1-A4 of this form. Section B of this form will be completed by the Zoning Administrator.

SECTION A1: APPLICANT & PROPERTY INFORMATION

NAME OF OWNER _____

LOCATION _____

GRID NUMBER _____

SECTION A2: PROJECT INFORMATION

TYPE OF PROJECT NEW SINGLE-FAMILY RESIDENCE ADDITION ACCESSORY STRUCTURE

DECK/PORCH/SUNROOM SHED POOL/HOT TUB GENERATOR GROUND SOLAR

CONDENSOR FUEL STORAGE TANK SPORT COURT OTHER

DESCRIPTION OF WORK TO BE PERFORMED _____

DIMENSIONS _____ X _____ TOTAL SQ. FT. _____ TYPE OF WORK EXISTING CONDITION NEW CONDITION

SECTION A3: ATTACHED HERETO, I SUBMIT THE FOLLOWING REQUIRED INFORMATION:

FRONT YARD SETBACK _____ FEET FROM PROPERTY LINE (NOT EDGE OF ROAD) N/A

SIDE YARD SETBACK _____ FEET FROM PROPERTY LINE N/A

REAR YARD SETBACK _____ FEET FROM PROPERTY LINE N/A

SECTION A4: TO BE COMPLETED FOR A NEW SINGLE-FAMILY RESIDENCE ONLY

FRONT YARD SETBACK FROM CENTER LINE OF ROAD _____ FEET

LOT AREA _____ SQUARE FEET & LOT AREAGE _____ ACRES & LOT COVERAGE _____ PERCENT

WIDTH OF LOT ALONG BUILDING LINE _____ LINEAR FEET (FLAG LOT)

LOT FRONTAGE AT ROAD _____ LINEAR FEET & MINIMUM WIDTH OF LOT _____ LINEAR FEET

DIMENSION OF BUILDING SQUARE ON LOT _____ FT X _____ FT

BUILDING HEIGHT _____ FEET BUILDING HEIGHT IN STORIES _____

BUILDING FLOOR AREA _____ SQUARE FEET (TO INCLUDE BASEMENT, GARAGE AND BONUS ROOM)

SECTION B: OFFICE USE ONLY

DENIED (PURSUANT TO CHAPTER 240-28 SCHEDULE B OF THE ZONING CODE) _____ ZONING DISTRICT

COMMENTS _____

CLEAR FOR PERMIT

SIGNATURE OF ZONING ADMINISTRATOR _____ DATE _____