



City of Rio Communities

ZONING CERTIFICATION FORM:

PROPERTY TO BE CERTIFIED (Information obtained from Valencia County Assessors Map)

Name on Property: _____

Address: _____

Legal Summary: _____

Subdivision: _____

UPC#: _____ Account #: _____

Applicant: Name: _____

Company/Organization: _____

Address: _____

Phone: _____ Email: _____

Property Type (describe): _____

Number of buildings: _____

of units: _____

Allowed to sell liquor at this location (circle one): Yes No

Allowed to sell tobacco products at this location (circle one): Yes. No

Letter addressed to: _____ Company/Organization: _____

Address: _____

Phone: _____ Email: _____

Zoning Certification:

I, _____ Chairman of the Planning and Zoning Commission certify the above information is correct.

(Signature) _____ Date: _____