City of Lyons

161 NE Broad St Lyons, GA 30436 Office (912) 526-3636 Fax (912) 526-0607

\$50 Application Fee Required

Zoning Permit – Certificate of Use Application

Date: Current Zone:			
Property Owner Name:			
Address:		Tax Map:	
Phone Number:			
Mailing Address (if different from above):			
City:	State:		Zip:
□New Construction (provide with applicat	tion the following)):	□Renovation/Addition
• Site Plan (must show setbacks an	d property lines)		
Construction Plans			
Total Sq. Ft. of any construction o	r addition	\$	Cost of Improvement
Electrical Contractor			
HVAC Contractor			
Plumbing Contractor			
Zoning Classification			
Nature of Use:			
Signature of applicant verifies the above information is tru approved and accepted that no changes or refunds can be that any misrepresentation of information on this applicat being initiated against the property owner or his/her repre	e made once issued. I am ion may result in the rev	authorized to sign	for the property owner and understand
Print Name		Signature	
Conditions under which approved:			

Zoning Officer Approved Signature