



<b>FOR OFFICE USE ONLY</b>	
Date Received: _____	Permit #: _____

**PLANNING & COMMUNITY DEVELOPMENT**  
 2757 East Point Street, East Point, GA 30344

*Zoning@eastpointcity.org*  
 Phone: (943) 200-2029, opt. 2

## REQUEST FOR ZONING VERIFICATION / ALCOHOL CERTIFICATION

Select:       Zoning Verification Letter               Alcohol Certification

**APPLICANT**

Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

**DESCRIPTION OF REQUEST**

Provide a brief explanation of the proposed use of the property(ies) or describe the intent of this request:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SUBJECT LOCATION**

As the applicant, I hereby request a zoning verification or alcohol certification for the following property(ies):

Address: _____	Parcel ID: _____

**FEES AND DELIVERY**

There is a **\$50.00 fee associated with each address and/or parcel**. Fees must be paid via the BS&A Portal. Requests for zoning verification/alcohol certification are normally completed within five (5) – ten (10) business days. Requests shall be submitted via the BS&A Portal [Link to BS+A Online Portal](#) and the requests will be issued via email to the email address provided in the application.