Village of Bloomfield
PO Box 609 | N1100 Town Hall Rd | Pell Lake, WI 53157
(262) 279-6039 | Fax: (262) 279-3545

Tax Parcel #:
&_____

Zoning Verification Request Form

Fee: $150.00

Date:_____

Name:_____

Company Name: _____

Address: _____

_____

Phone: _____ Email: _____

All zoning verification letters will include the following:

- Zoning of property
- Permitted and conditional uses of the zoning
- Any current building, zoning, and/or fire violations

Please list any other information you would like to request below or provide a separate document with the information requested along with this form.

_____

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_____

(turn over for more space)

Applicant Signature:_____ Date: _____

Office Use Only:		
Date Paid:	Amount Paid:	Received by: