



NON-CONFORMING USE APPLICATION

NONREFUNDABLE FEE \$275.00

For Office use only:		
Date Received _____	Date Fee Paid _____	BOA Hearing Date _____
Existing zone designation _____	Applicable Section of zoning code _____	

Name of Applicant _____ Email _____

Address _____ Phone _____

Do you own this property Yes _____ No _____

If no, Name of

Owner _____ Email _____

Address _____ Phone _____

Legal Description of Property (Street address, subdivision lot and block numbers, or attached a Legal description prepared by a surveyor)

Describe type and size of use at the present time or at the time you acquired the property:

Describe how this use does not conform to the current zoning code

Note the date use began (or structure was built) as well as the size or intensity of the use when said use began:



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AFFIDAVIT – nonconforming use

I hereby depose and say that all of the above statements requesting this Nonconforming use certification for the address _____ Lander, Wyoming and the statements contained in any papers submitted herewith are true.

Signature

Date

County of Fremont)
) ss.
State of Wyoming)

The foregoing instrument was acknowledged before me by _____
This ____ day of _____, 20__.

Notary Public

My commission expires: _____

Approved by City of Lander

Date

County of Fremont)
) ss.
State of Wyoming)

The foregoing instrument was acknowledged before me by _____
This ____ day of _____, 20__.

Notary Public

My commission expires: _____