



Shenandoah County

Office of Community Development
Planning & Zoning Department
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Zoning Use Worksheet

Name: _____ Home Address: _____
Phone: _____
Email: _____ Address of Property: _____
Date: _____

<u>Number of Parking:</u>	New Parking Needed?
Off-Street: _____ On-Street _____	Off-Street: _____ On-Street _____
Number of Employees: _____	Living Area Used For Business: _____%
Solely In-Home Business: Yes No	Use of Existing Building(s) Yes No
New Buildings Needed: _____	Number of Existing Buildings Used: _____
Customers Allowed On-Site: Yes No	Expected Daily # of Customers: _____
Business Visible From Road: Yes No	Outside Display of Products: Yes No
Signage: Yes No	Owner Operated: Yes No

What Is Your Business/Use Proposed To Do?

OFFICE USE ONLY

Special Use: _____ By Right: _____

Next Action: _____

Signed: _____ Date: _____
