



CITY OF NORWALK
Planning & Zoning
Norwalk City Hall, Room 129
125 East Avenue, PO BOX 5125
Norwalk, CT 06856-5125

ZONING SIGN OFF

DATE: _____

OWNER NAME: _____

PROJECT ADDRESS: _____

PHONE NUMBER: _____

APPLICANT EMAIL: _____

APPLICANT NAME & SIGNATURE: _____

Proposed Work:

This sign-off is applies only to the proposed work described above. The limited scope of proposed work, as described above, does not require a Certificate of Zoning Compliance.

District _____
Block No. _____
Lot No. _____
Zone _____

Reviewed and approved by:

ZONING STAFF

DATE