



OFFICE OF COMMUNITY PLANNING AND DEVELOPMENT

EMAIL: permits@wbr council.org • Phone: (225) 336-2434

Zoning Designation Form (OCPD Form #004czd)

Name/Business

Name: _____

Applicant's Name: _____

Contact Number: _____

Address of Property: _____

Parcel #: _____

Map #: _____

Zoning District: _____

Proposed Use(s) for
Property: _____

By signing here, I certify that the use(s) listed above are true, correct and thoroughly accurate to the best of my knowledge.

Applicant's Signature

Date

If a "grandfathered-in" legal non-conforming use, applicant must read and sign this acknowledgement below:

I certify that the business listed on this form has been in "continual operation" (no cessation of business activity for six or more consecutive months) at the address listed on this form since August 1998 (prior to the adoption of the Parish zoning ordinance). I further certify that I have read Parish Code 111-79 and that I understand that if this business is extended or enlarged, then it will need to be rezoned.

Applicant's Signature

Date

If a "Home Occupation", please read the Home Occupation definition and sign statement below:

I certify that I have read, understand, and intend to comply with the definition of "Home Occupation" as given in Section 101-1 of the West Baton Rouge Parish Code.

Applicant's Signature

Date

FOR OCPD STAFF

The proposed use(s) stated above:

is/are **ALLOWED** in said zoning district.

is/are **NOT ALLOWED** in said zoning district.

See WBR Code of Ordinances for additional information.

By: _____

Office of Community Planning & Development

Date: _____