



**ZONING COMPLIANCE REQUEST**  
**ALL INFORMATION IS REQUIRED**

*Please Print*

Location to be Researched

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Information Requested (describe what information is desired in the letter):

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Name 

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Address 

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City, State Zip

Phone 

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 Fax 

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E-mail 

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There is a \$95.00 application fee, please make checks payable to the City of Norfolk.  
Depending on the scope of the request, a survey of the property might be required.

**Please submit this form and application fee either in person or by mail to:**

**Department of City Planning/Zoning**  
**810 Union Street Room 508**  
**Norfolk, Virginia 23510**

All information submitted with this application is non-returnable and will be kept as a record of processing this request.

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Signed Date