

TOWN OF FARMVILLE BUSINESS ZONING FORM

BUSINESS NAME:	TELEPHONE#:
OWNER:	TELEPHONE#:
BUSINESS LOCATION:	
PERSON MAKING APPLICATION:	

DESCRIPTION OF BUSINESS	

<p>I understand that any functions/uses other than described above require approval from the Town of Farmville Zoning Administrator. I also understand that a zoning authorization does not authorize me to begin operating a business and that a business license is required. I further understand that a building inspection and/or permit may be required and I need to contact the Town of Farmville Building Official at 434 392-8465</p>	
SIGNED:	DATE:

DEPARTMENT USE ONLY

NOTES:		
ZONING DISTRICT:	APPROVED:	NOT APPROVED:
SIGNED:	DATE:	