

# City of Hawthorne

6875 SE 221<sup>st</sup> Street  
PO Box 1270  
Hawthorne, FL 32640

Telephone: (352)481-2432  
Fax: (352)481-2437

## Zoning Certification Form

Parcel Number \_\_\_\_\_ Property Address \_\_\_\_\_

Zoning: \_\_\_\_\_ Land Use: \_\_\_\_\_

Required setbacks: Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Side: \_\_\_\_\_

Type of Work:

### RESIDENTIAL SINGLE FAMILY:

New construction (requires location plan)  
 Re-roof or roof repair  
 Electrical work  
 Plumbing  
 Addition/alteration  
 Accessory building (requires location plan)  
 Other: \_\_\_\_\_

### ALL OTHER PROPERTY TYPES (COM, IND, ETC):

New construction (requires location plan)  
 Re-roof or roof repair  
 Electrical work  
 Plumbing  
 Addition/alteration  
 Accessory building (requires location plan)  
 Other: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Description of Work: \_\_\_\_\_  
\_\_\_\_\_

### OFFICE USE ONLY BELOW THIS LINE

Fee Paid by: Cash \_\_\_\_\_ Check No. \_\_\_\_\_ \$25.00 Fee Received: \_\_\_\_\_

Approved and certified as compliant with land and zoning requirements for the City of Hawthorne by:

\_\_\_\_\_  
Name of Land Development Regulation Administrator or Agent

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

Permit Number: \_\_\_\_\_