Zoning Summary Sheet

License ID# (Office Use)_____

In order for the Zoning Administrator to determine the classification of your business and to expedite your license application, **this form must be completed and submitted with a floor plan and a site plan which is dimensioned and drawn to scale** (Click here for example site & floor plan formats). Zoning approval will not be granted for this license request without this information.

Business Address _____ **Business Type** _____
Street Address

Licensee/Owner Name:_____ **Day Phone**: _____ /_____ - _____
(Responsible Party) First Middle Maiden Last

Please answer question 1 - 6. You will also need to answer question 7 - 16 if you are applying for a restaurant license.
Contact the zoning inspector at 651/266-9083, if you have questions about the information needed on this form.

1. What is the gross floor area for this business? _____ square feet. 2. What was the previous use of this space? _____ 3. How many off-street parking spaces are provided for this business?_____ 4. How many different uses are in the building?____ 5. What are these uses?_____ 6. Do you own the property or are you leasing it? _____	7. Do you intend to have a drive-thru window?____ yes ____ no 8. Will you have a permanent menu board? ____ yes ____ no 9. Do you intend to serve liquor? ____ yes ____ no 10. Is this a restaurant associated with a chain or franchised business? ____ yes ____ no 11. Will customers pay for their food before consuming it? ____ yes ____ no 12. Is a self-service condiment bar proposed? ____ yes ____ no 13. Are trash receptacles provided for self-service bussing? ____ yes ____ no 14. Will there be hard finished, stationary seating? ____ yes ____ no 15. Are your main course food items prepackaged _____ or made to order? _____