



KINGS REGIONAL SERVICE COMMISSION
 27 Winter Street, Unit 1, Sussex NB E4E 2H9
 email: info@KingsRSC.ca www.KingsRSC.ca
 Telephone: (506) 432-7530
 Mon to Fri 8am to 4pm

Do Not Write in Shaded Areas

File No.	Receipt No.
Zoning Confirmation <input type="checkbox"/>	Zoning Compliance <input type="checkbox"/>

Zoning Confirmation/Compliance Application

Applicant Information

Applicant: _____ Registered Owner (if different): _____
 Phone: _____ Fax: _____
 Address: _____ Postal Code: _____
 Email: _____

Property Requiring Zoning Confirmation/Compliance

Property Identification Number (on Tax Bill): _____ Municipality: _____
 Location: _____ Postal Code: _____

Additional Information Requested

How shall we notify you once the process is complete? (Check and complete)

A. Call you for pick

Name: _____ Phone: _____ Fax: _____

B. Mail you the results Same as above

Mail to: _____ Postal Code: _____

C. Fax you the results Fax: _____

D. Email the results

Information is provided in written letter format

Method of Payment

Zoning Confirmation Fee \$100

Zoning Compliance Fee \$200

Method of Payment (Check one): Cash Cheque Credit Card Debit

Credit Card Number: _____ Expiry Date ____/____ CVC Number: ____

Card Holder Name: _____

Signature

Applicant's Signature _____ Date _____