



City of Yakima

# Zoning Verification Letter

## Application Packet

### About this Application:

A zoning verification letter confirms a property's current zoning district, future land use category, and allowed land uses. Such letter is sometimes required by financial institutions.

Copies of documents may be obtained through a Public Records Disclosure request (PDR) with the City Clerk.

Requests may be submitted at [www.yakimawa.gov/services/clerks/public-record-request/](http://www.yakimawa.gov/services/clerks/public-record-request/). Copies of public notices (Notice of Application, Notice of Decision, etc.) do not require a PDR.

**City of Yakima, Planning Division**

**129 North 2<sup>nd</sup> Street, 2<sup>nd</sup> Floor, Yakima, WA 98901**

**Phone#: (509) 575-6183 Email: [ask.planning@yakimawa.gov](mailto:ask.planning@yakimawa.gov)**

Check <https://www.yakimawa.gov/services/planning/land-use-application-forms/>  
for the most current version of this application form.



## COMMUNITY DEVELOPMENT DEPARTMENT

### Planning Division

129 N. 2<sup>nd</sup> St., Yakima, WA 98901

Phone: (509) 575-6183 Email: [Ask.Planning@yakimawa.gov](mailto:Ask.Planning@yakimawa.gov)

# ZONING VERIFICATION LETTER

## LAND USE APPLICATION FORM

Please complete this page and the attached forms. If you have any questions about this form or the application process, please ask to speak with a planner. All necessary attachments and the filing fee are required upon submittal. Filing fees are non-refundable.

### APPLICANT INFORMATION:

Name: \_\_\_\_\_ Company (if applicable): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Interest in Property: ☐ Property Owner ☐ Agent ☐ Purchaser Other: \_\_\_\_\_

### SUBJECT PROPERTY INFORMATION

Address: \_\_\_\_\_

Parcel Number(s) (if lengthy, attach on separate document): \_\_\_\_\_

### DESCRIPTION OF REQUEST

Describe the reason for your request and list any items the letter should include:

### CERTIFICATION

I certify that the information on this application and the required attachments are true and correct to the best of my knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

#### STAFF USE ONLY:

File/Application #: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Received By: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Receipt No.: \_\_\_\_\_