



GROWTH MANAGEMENT DEPARTMENT
201 SE 3rd STREET (Second Floor) Ocala, FL 34471
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City of Ocala

LAND USE AND ZONING REQUEST
(Information Request - \$200.00 fee)

Date: _____

1. Name: _____

Mailing Address: _____

City _____ State _____ Zip Code _____ Phone # _____

Fax # _____ Email address _____

2. Property information:

a. Property owner(s): _____

b. Parcel account number(s) [from tax roll]: _____

c. Section _____ Township _____ Range _____ Size of Property _____

d. Street address of property (or cross streets):

3. Current use of property: _____

4. Information requested or proposed use: _____

