



Supplemental Ownership Information Form

Complete and submit this supplemental form as part of a Zoning or Building Permit Application.

Address

Provide the full address of property.

Select if the property is owned by an individual or company.

1

Property Address: _____

This property is owned by a/an (select one):

Individual(s) if selected skip Section 2.

Company

Property Owner

Provide the contact information for the owner.

Note: If the legal entity is a "company" then provide the contact information for any natural person with more than 49% equity interest in the property. If no individual has such an interest, provide contact information of two (2) natural persons with the largest equity interest in the property.

2

If "Company" is selected, complete the following information:

Owner (1)

Name: _____

Mailing Address: _____

Owner (2)

Name: _____

Mailing Address: _____

Declaration and Signature

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein I am subject to the possible revocation of any licenses as a result of my false application, and such other penalties as may be prescribed by law or ordinance.

Applicant's Signature: _____

Date: _____