



# Property Verification for Zoning/Occupancy

City of Millington  
7930 Nelson Road  
Millington, TN 38053  
(901) 873-5701

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

Business Name: \_\_\_\_\_

Contact person: \_\_\_\_\_

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

Provide a description of the proposed use. Including type of products being sold, services being offered, items distributed, stored, manufactured, etc. (attach additional pages if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I attest the above is true and accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

### Staff Use:

Zoning District: \_\_\_\_\_

Use Designation: \_\_\_\_\_

Permitted Use in Zone? Yes \_\_\_\_\_ No \_\_\_\_\_ Conditional Use \_\_\_\_\_

Any Special Requirements? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Staff Reviewer

\_\_\_\_\_  
Date