



CITY OF MURRIETA

Development Services Department

Planning Division

1 Town Square | Murrieta, CA 92562 | 951-461-6061

www.murrietaca.gov

Zoning Verification Application (DS-255)

For Planning Office Use Only

Case Number: _____ Date Submitted: _____ Received by: _____

APPLICANT INFORMATION

Contact Name: _____ E-Mail: _____

Company Name: _____ E-Mail: _____

Mailing Address: _____
Street

City _____ State _____ ZIP _____

Daytime Phone No: (____) _____ Fax No.: (____) _____

PROJECT TITLE AND DESCRIPTION

Project Name/Name of Center: (if applicable) _____

APN and Tract or Parcel Number: _____

Property Address: _____



Attach Exhibit Showing Property Location

PRINTED NAME OF APPLICANT

SIGNATURE OF APPLICANT

Additional copies of this application may be obtained from the Planning Division Web Page at

<https://ca-murrieta.civicplus.com/276/Planning-Documents>