



ZONING VERIFICATION LETTER

Planning and Zoning

Name of Property Owner: _____

Current Business Name and Type: _____

Address of Subject Property: _____

Legal Description: _____

(Lot, Block, and Subdivision or Abstract, Survey, Tract and Section)

Please provide information of person requesting information:

Name: _____

Address: _____

Phone number: _____ Email: _____

Please submit request to:

The City of Paris

Attn: Triniti Frazier, Planning Technician

PO Box 9037

Paris, Texas 75461-9037

tfrazier@paristexas.gov