

Nonconforming Lot Registration

Municipality of Anchorage
Planning Department
PO Box 196650
Anchorage, AK 99519-6650



PETITIONER*		PETITIONER REPRESENTATIVE (if any)	
Name (last name first)		Name (last name first)	
Mailing Address		Mailing Address	
Contact Phone – Day	Evening	Contact Phone – Day	Evening
Fax		Fax	
E-mail		E-mail	

*Report additional petitioners or disclose other co-owners on supplemental form. Failure to divulge other beneficial interest owners may delay processing of this application.

PROPERTY INFORMATION		
Property Tax # (000-000-00-000):		
Site Street Address:		
Current legal description: (use additional sheet if necessary)		
Zoning:	Acreage:	Grid #

APPLICATION REQUIREMENTS
(One of each applicable item is required for initial submittal, additional copies are required after initial submittal)
<input type="checkbox"/> Original Signed As-Built, No Older Than 120 Days, plus 7 Copies
<input type="checkbox"/> 8 Copies of Title History
<input type="checkbox"/> 8 Copies of Letter of Non-Conforming Determination from Land Use Review

I hereby certify that (I am)(I have been authorized to act for) owner of the property described above and that I petition for a nonconforming lot registration in conformance with Title 21 of the Anchorage Municipal, Code of Ordinances. I understand that payment of the application fee is nonrefundable and is to cover the costs associated with processing this application, and that it does not assure approval of the lot registration.

Signature	<input type="checkbox"/> Owner <input type="checkbox"/> Representative	Date
	(Representatives must provide written proof of authorization)	

Print Name

Accepted by:	Fee	Case Number	Decision Date