

# Nonconforming Lots Registration

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



Please fill in the information asked for below.

PETITIONER*		PETITIONER REPRESENTATIVE (IF ANY)	
Name (last name first)		Name (last name first)	
Mailing Address		Mailing Address	
Contact Phone: Day:	Night:	Contact Phone: Day:	Night:
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 #

<input type="checkbox"/> Current as-built no older than 120 days
<input type="checkbox"/> Title History
<input type="checkbox"/> Letter of Non-Conforming Determination From Land Use Enforcement

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 lots 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.

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Date Signature (Agents must provide written proof of authorization)

Application for nonconforming lots

Accepted by:	As-built	Fee	Case Number
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