

Village of Los Ranchos de Albuquerque
6718 Rio Grande Boulevard NW
Los Ranchos de Albuquerque, NM 87107
Phone: (505) 344-6582

FOR OFFICIAL USE	
Zone: _____	Date Submitted: _____
Receipt #: _____	Letter Date: _____

Application fee of \$25.00 due at submittal. The Village of Los Ranchos de Albuquerque does not take responsibility for information on or enforcement of restrictive covenants on the subject property.

ZONING CERTIFICATION APPLICATION

Address: _____ **Zip:** _____
Los Ranchos de Albuquerque

Legal Description (Only if property has no formal address)

Subdivision _____ **Block** _____ **Lot No.** _____ **Tract No.** _____ **MRGCD Map No.** _____

PROPERTY OWNER

Name: _____

Mailing address: _____
Street City Zip

Telephone: _____ **Email:** _____

CONTRACTOR/AGENT OR FIRM

Representative for property owner who will handle application processing in lieu of property owner. If not applicable, leave blank.

Contact Name: _____ **Title:** _____

Business Name: _____

Mailing address: _____
Street City Zip

Telephone: _____ **Email:** _____

REQUIREMENTS

List of specifics to address (attach additional document if more space needed):

By submitting this application, I hereby authorize Los Ranchos Planning & Zoning staff to inspect this property for the purpose of determining the status of the use; further I understand that any and all violations noted as a result of this inspection are subject to immediate correction.

Signature of Property Owner (or submit affidavit of agent) **Date**

Signature of Applicant (Contractor/Agent) (if applicable) **Date**