

Date: \_\_\_\_\_

***Borough of Newtown***  
**LAND USE INQUIRY FORM**

<input type="checkbox"/> Inquiry
<input type="checkbox"/> Complaint
<input type="checkbox"/> Request for CZC
\$30 Rcvd _____
\$60 Rcvd _____
<input type="checkbox"/> Other _____

Property in Question:

Address: \_\_\_\_\_

Owner: \_\_\_\_\_

Your Contact Information (OPTIONAL):    \_\_\_\_\_ same as above

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Action Taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Officer Initials: \_\_\_\_\_