Zoning Review Form

App. No(s) 7637 Date of Review: 7/10/2019 Inspector: R. Leonard
Zoning Designation & Type: 1 2 Zoning Authority: OKC
1. What appears to be the major use of surrounding property? empty field
2. Does the area appear to support the zoning designation? (If yes skip to No. 5.)
If no, review the following aspects:
expressed reason for zoning designation when officially zoned:
zoning for the surrounding area:
actual land use:
• are there existing plans for commercial or industrial development? yes NO
• is there proper access to the subject property? yes NO /
are utilities available (water, electricity, sewage) on the property? // Ves No //
• is the property being assessed in accordance with zoning? YES NO
if no, at what use is property being assessed?
3. Was the property zoned/rezoned for the sole purpose of allowing outdoor advertising? yes No.
4. List any zoning officials and their titles you spoke with during the review process:
5. Does this zoning meet HBA requirements? Yes NO
If no, why not?

Confirmation of Zoning

(Must be completed for each zoned location)

Name of Applicant: VITAL OUTDOOR ADVERTISING
Location of Property: JOHN KARTHUE TURNPIKE, WET UPE, I-40 SOUTH, 35 WILES
(Location description must coincide with description given on the application form. 501 S. John Kilpatrick TPKE
in the Corporate Limits of: OKLAHOMA CITY
(If not inside the corporate limits of any town or city Please enter none.)
► The remainder of this form must be completed by the proper zoning authority. ◄
What is the zoning designation of the above-referenced property?
IMPROVAL GT
2. Does your city/county have a comprehensive zoning/development plan? (An official plan or map which outlines the intended use of properties located inside of your jurisdiction.) Yes No
3. If yes, does the above-referenced property's zoning designation meet with the plan guidelines? Yes No
4. Was this zoning designated within the last two years?YesNo (if yes, a copy of the zoning application and the approved documentation must be attached.)
C:7 x Orc 405-297-2495
Name of Authority (City, County etc.) Vo5 - 297 - 2495 Telephone No.
Tohn Wilson Printed Name of Zoning Official Title
Signature of Zoning Official Date
Signature of Zoning Official Date
"If the zoning designation is PUD, SPUD or Corridor, a copy of the approved plan must be

submitted with application.

(Notice: Completion of this form does not constitute afficial parmission or observed from our least

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