

Town of Avoca
P O Box 160
222 North Old Wire Road
Avoca, Arkansas 72711

Zoning Verification

Name: _____

Business Name: _____

Mailing address: _____

Physical address: _____

Phone/cell numbers: _____

To be completed and signed by zoning official:

How is the property zoned? _____

What is the business? _____

What is the use? _____

*Is it a permitted use? Yes*____ *No*____

If no, what is conditional use? _____

Zoning official's signature _____

Date _____

To be completed and signed by applicant:

Have you received a copy of Avoca Zoning Code 2015?
*Yes*____ *No*____

Applicant's signature _____

Date _____