

**Affidavit of Notification
First Letter**

For additional information, please call the Planning Department at 602-262-7131, option #6.

Rezoning Application No.: _____

Applicant Name: _____

Location: _____

I confirm that notice as required for the case noted above has been completed in accordance with Section 506.B.7 of the Zoning Ordinance.

Applicant/Representative Signature

Date

This instrument was acknowledged before me on this _____ day of _____, 20____, by
_____. In witness whereof I hereunto set my hand and official seal.

Notary Public

My commission expires _____