REQUEST FOR ADDITIONAL RESIDENTIAL UTILITY METER(S)
AG & RS ZONING CLASSIFICATIONS FOR
BARTLETT

NAME: __________________________________________________

ADDRESS: _______________________________________________

CITY: _______________ STATE: _______ ZIP: ____________

PHONE: _________________________ FAX: __________________

Existing Structure  □ (example: single dwelling to duplex, triplex, etc.)
Proposed Structure □ (example: guest house, pool house, garage, etc.)

Describe the type and use of the structure in question and the use of other structures on
the lot:

___________________________________________________________________________

___________________________________________________________________________

Please forward to: Bartlett Code Enforcement
Attn:  Mr. Jim Brown
Office: (901) 385-6425  Fax:  (901) 385-6434

*********************** For Zoning Use Only ***********************

☐ Approved     Reason: ____________________________________________

                                                                 ________________

☐ Not Approved   Reason: __________________________________________

                                                                 ________________

Zoning Rep.    Signature: ___________________________ Date: ___________
Print Name: ___________________________ Existing Zoning ___

MLGW Contact: ___________________________ Phone: __________________

Send completed form to: MLGW Land and Mapping
Email: Address.assignment@mlgw.org
or
FAX:  729-8605