

City of Rockford, Illinois

Planning and Zoning Division
425 East State Street, Rockford, IL 61104
Phone: (779) 348-7158 Fax: (815) 967-4243
Web Site: www.rockfordil.gov



ZONING CONFIRMATION LETTER REQUEST FORM

TO: City of Rockford, Zoning Department
425 East State Street
Rockford, Illinois 61104
PHONE: (779) 348-7158

Date: _____ 2026

FROM: _____

Phone: _____

Fax: _____

E-mail: _____

Please indicate how you wish to receive this letter. PLEASE CHOOSE ONE METHOD ONLY

_____ Fax _____ Mail _____ E-mail

Please send a Zoning Confirmation letter for the following property:

ADDRESS: _____

PARCEL INDEX NO.: _____

PRESENT USE: _____

PROPOSED USE: _____

SIGNATURE: _____

There is a \$102.30 charge for EACH parcel index number (PIN). Each PIN must be on a separate application.

Payment must be received before this request is processed. Please make checks payable to the City of Rockford.

Please be certain to order the letter a
minimum of 5 business days in advance

1010 1000 61456 ZCL Fee: \$95.00

1010 1000 60228 Tech Fee: \$ 9.50

Total: \$104.50