

ZONING BOARD OF ADJUSTMENT APPLICATION FOR APPEAL



Applicant is a: ☐ Property Owner ☐ Tenant ☐ Other _____

Applicants Name: _____

Address: _____

Phone: _____ Email: _____

Property Owner: _____

Owners Address: _____ City/State/Zip: _____

Phone: _____ Email: _____

To members of the board of adjustment:

I hereby appeal from the decision of the Zoning Administrator rendered on _____ day of _____, 20____

Location of proposed variance: _____

Legal description (Plat&Lot): _____

Zoning: _____ Principal Use of Property: _____

I request a variation from the current requirement for:

☐ Front Yard ☐ Side Yard ☐ Rear Yard ☐ Fence ☐ Sign ☐ Parking ☐ Height

☐ Other: _____

City Zoning Code Section # _____ which state(s) _____

I propose the following in lieu of that required: _____

Attached hereto and made part of this appeal, I submit the following:

- a) A statement indicating the reason for my appeal.
- b) A drawing showing proposed variance requested.
- c) A letter of authorization from the owner or lessee, if applicable.

AFFIDAVIT

State of _____)ss

County of _____)

I hereby deposit and say that all of the above statements and the statements contained in the papers submitted herewith are true.

X _____

Signature of applicant

Signed and sworn before me, this

_____ day of _____, 20__

Date received: _____ Paid: ☐ cash ☐ check# _____

(Notary Public)