APPEAL APPLICATION

THIS FORM SHALL BE FILED FOR AN APPEAL FROM AN ACTION OR DETERMINATION OF THE ZONING ENFORCEMENT/LAND USE OFFICER, ZONING ADMINISTRATOR AND/OR AN INTERPRETATION OF THE ORDINANCE AGAINST A PARTICULAR PARCEL OF PROPERTY

Applicant Information:

Name:		
Address:		
Contact Phone Number:	Email	
The adverse decision was m	de with respect to property described below:	
Landowner:	Parcel No.:Acreage	
Address:	PIN No.:	
	Deed BookPage	
Phone Number:	Existing Zoning District	
Directions to property:		
	hereby appeal to the Zoning Board of rse action or decision of the Zoning Enforcement/Land Use	
	or other staff of the Planning Division: (Give a general	-
	action being appealed and attach relevant documentation)	
	: In the space provided below, or on a separate sheet, pres or the appeal for the property in question. Provide justifica	
☐ If needed, a map has been equals 400 feet. I hereby request an interpre	ttached for illustration purposes at a scale no larger than 1 tion of:	inch
	of the ordinance	
	of the conditional use permit issued for the operation of	

The current zoning map

CONTINUED ON REVERSE SIDE....

I certify that all the information presented by me in this application is accurate to the best of my knowledge, information, and belief.

	Amount of Fee	
Ap	pplicant	
	Date Fee Paid	
Da	ite Signed	
	OFFICE USE ONLY BELOW THIS LINE	
1)	Date completed application received in office	
2)	Date of ZBOA hearing	
3)	Date of mailing notifications to adjacent property owners for Board of Adjustment meeting	
4)	Date notice of meeting posted on property	
5)	Date notice of meeting sent to local paper	
6)	6) Dates notice of meeting appeared in local paper	
7)	Date of decision on the application by the Zoning Board of Adjustment	
8)	Action/decision of the ZBOA	
	Appeal Granted	
	Appeal Denied	

Zoning Enforcement/Land Use Officer

Date