

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 PURSUANT TO SECTION 18 OF THE CHATHAM COUNTY ZONING ORDINANCE.

**Applicant Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Email \_\_\_\_\_

**The adverse decision was made with respect to property described below:**

Landowner: \_\_\_\_\_

Parcel No.: \_\_\_\_\_ Acreage \_\_\_\_\_

Address: \_\_\_\_\_

PIN No.: \_\_\_\_\_

\_\_\_\_\_

Deed Book \_\_\_\_\_ Page \_\_\_\_\_

Phone Number: \_\_\_\_\_

Existing Zoning District \_\_\_\_\_

Directions to property: \_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_ hereby appeal to the Board of Adjustment the following adverse action or decision of the Zoning Enforcement/Land Use Officer, Zoning Administrator, or other staff of the Planning Division: (Give a general description of the decision or action being appealed and attach relevant documentation) \_\_\_\_\_

\_\_\_\_\_

STATEMENT BY APPELLANT: In the space provided below, or on a separate sheet, present your interpretation or reason for the appeal for the property in question. Provide justification for your position.

\_\_\_\_\_

\_\_\_\_\_

If needed, a map has been attached for illustration purposes at a scale no larger than 1 inch equals 400 feet.

**I hereby request an interpretation of:**

Section/s \_\_\_\_\_ of the \_\_\_\_\_ ordinance

Section/s \_\_\_\_\_ of the conditional use permit issued for the operation of \_\_\_\_\_

\_\_\_\_\_

The current zoning map

