



APPLICATION FOR APPEAL

BOARD OF ADJUSTMENTS

APPELLANT(S): _____ DATE: _____

Business entity - Names of Officers, Directors; Shareholders or Members:

ADDRESS: _____

OWNER(S): _____

ADDRESS: _____

LOCATION OF PROPERTY: _____
(Street and number, subdivision and lot number)

DESCRIBE DECISION OF OFFICIAL FROM WHICH APPEAL IS MADE:

PROVISIONS OF ZONING ORDINANCE IN RELATION TO APPEAL:

NATURE OF APPEAL: _____

Signature of Appellant

Signature of Appellant

Date advertised for Hearing: _____

DATE OF HEARING: _____

Property owners notified _____ yes _____ no

Official's report attached _____

Attach Certified Mail Receipts:

DECISION: _____

RESTRICTIONS: _____
