

FORM FOR APPEALS
BOARD OF ADJUSTMENTS AND APPEALS

Do not complete....OWNER SHOULD JUST SIGN AT BOTTOM NEXT TO APPELLANT

DATE _____

APPELLANT _____ ADDRESS _____

OWNER _____ ADDRESS _____

LOCATION OF PROPERTY _____
SITE ADDRESS _____

FOR OFFICE: FILL IN SECTION 1, 2 OR 3 AS APPROPRIATE. DO NOT FILL IN MORE THAN ONE OF THESE SECTIONS. THIS APPLICATION IS NOT ACCEPTABLE UNLESS ALL REQUIRED STATEMENTS HAVE BEEN MADE. ADDITIONAL INFORMATION MAY BE SUPPLIED ON SEPARATE SHEETS IF THE SPACE PROVIDED IS INADEQUATE.

SECTION 1... APPEAL FROM DECISION OF BUILDING INSPECTOR

Relation to the enforcement of the Zoning Ordinance.
Describe decision of the Building Inspector for which appeal is made:

SECTION 2... APPLICATION FOR A SPECIAL EXCEPTION PERMIT

As required by the Zoning Ordinance.
Provision of the Zoning Ordinance requiring a Special Exception in this case:

Description of proposed use showing justification for a Special Exception:

SECTION 3... APPLICATION FOR AN ADJUSTMENT

As provided by the Zoning Ordinance.
Provision of the Zoning Ordinance from which an adjustment is requested.

Peculiar or unusual conditions which justify an adjustment:

APPELLANT (sign here) _____

STATUS

DATE THIS APPLICATION FILED _____
NOTICE OF HEARING _____
ADVERTISED ON _____
DATE OF HEARING _____
NOTICE MAILED TO _____

DECISION

Application of appeal.....GRANTED
..... DENIED
in accordance with terms of the following
resolution: _____

Date of Decision: _____

CHAIRMAN _____