



**COMMUNITY DEVELOPMENT  
PLANNING & ZONING**

**BOARD OF ADJUSTMENT  
VARIANCE OR APPEAL APPLICATION**

Name of applicant: \_\_\_\_\_

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

Phone # \_\_\_\_\_ Cell Phone# \_\_\_\_\_

Email Address \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

Owner's Phone#: \_\_\_\_\_ Cell Phone# \_\_\_\_\_

Location of Property: \_\_\_\_\_

Property Zoning: \_\_\_\_\_

Change Being Requested: (use extra sheets as needed)

Signature of Owner: \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ of

Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Non-refundable filing fee: \$300.00**

**FOR OFFICE USE ONLY**

Docket # \_\_\_\_\_

Received by: \_\_\_\_\_

<input type="checkbox"/> Property Map	Filing Date	Appeal Posted
<input type="checkbox"/> Site Plan	Posting Date	Appeal Date
<input type="checkbox"/> Letter of Reasons	Mailing Date	Permit Hearing
<input type="checkbox"/> Filing Fee	Hearing Date	Legal Description
<input type="checkbox"/> List of Owners	Action Date	
	Council Action Date	