



**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: \$75.00

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	