

APPEAL FROM THE DECISION OF THE BOARD OF ADJUSTMENT  
TO THE BOARD OF COUNTY COMMISSIONERS

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DO NOT WRITE IN THIS SPACE-FOR OFFICE USE ONLY

Date Filed \_\_\_\_\_ Received By \_\_\_\_\_ Appeal Application No. A- \_\_\_\_\_

Date of decision of the Board of Adjustment \_\_\_\_\_  
( Complete application, including fee, must be filed with the County Building Official within thirty (30) days of the date of the decision of the Board of Adjustment being appealed)

Date Set for Hearing \_\_\_\_\_ Date Hearing Held \_\_\_\_\_

Fee Paid-Receipt No. \_\_\_\_\_ Amount \_\_\_\_\_ Date \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Action by the Board of County Commissioners on Appeal \_\_\_\_\_  
(granted, denied, other)

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SECTION TO BE COMPLETED BY APPLICANT

Information concerning Title Holder(s) and Agent

Name of Appellant(s) \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_

Any other persons jointly appealing the decision of the Board of Adjustment Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list such persons \_\_\_\_\_  
\_\_\_\_\_

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**NOTE: If the Appellant(s) of the subject appeal is appointing an agent to represent him/her, a letter from the Appellant(s) addressed to the County Building Official, MUST be attached to this application at the time of submittal stating such appointment.**

Appellant(s) (Agent), if applicable \_\_\_\_\_

Address \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_

Appeal is taken from the decision of the Board of Adjustment, a copy of which is attached, for a reversal or modification of said decision in conformity with the discretionary powers of the Board to permit the \_\_\_\_\_ on the property  
(insert use of construction proposed)

described below, and in conformity with the plans on permit application dated \_\_\_\_\_

Revisions or modification of said decision should be granted because (attached addition pages if desired): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location and Use:

Legal Description \_\_\_\_\_

Tax Parcel Number \_\_\_\_\_

Location or Address of Property \_\_\_\_\_

Present Use \_\_\_\_\_  
(commercial, industrial, residential, agricultural, etc.)

Land Use Plan Map Category \_\_\_\_\_

**APPEAL FROM THE DECISION OF THE BOARD OF ADJUSTMENT  
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**Zoning District** \_\_\_\_\_

**Actions by Applicant on Property**

**Permit applied for and denied?** \_\_\_\_\_ **Permit Application dated** \_\_\_\_\_

(yes/no )

**A previous appeal** \_\_\_\_\_ **was made with respect to these premises, Appeal Application** \_\_\_\_\_ **was not**  
**Application No.** \_\_\_\_\_

**I (we) certify that all of the above statements and the statements contained herewith are true to the best of my ( our ) knowledge and belief.**

\_\_\_\_\_  
**Name of Appellant(s)**

\_\_\_\_\_  
**(Signature) Appellant(s)**

\_\_\_\_\_  
**Date**