



BOARD OF ZONING APPEALS APPLICATION

Case No. _____

Date Filed: _____

Type: *Variation/Interpretation*

Name of Applicant filing appeal: _____

Address: _____

Phone: _____

Property Owner's Name, Address, Phone Number if different from above:

Address of property under consideration: _____

Proposed use of property: _____

Current zoning classification of property: _____

Date of Zoning Inspector's decision; _____

Section of the Code being appealed: _____

The Appeal is requested based on the following : _____

Please complete the following:

- 1. The variance is (substantial/insubstantial) because:**

- 2. The essential character of the neighborhood (would/would not) be substantially altered or adjoining properties (would/would not) suffer a substantial detriment as a result of the variance because:**

- 3. The applicant's predicament feasibly (can/cannot) be resolved through some method other than a variance:**

Provide the names and addresses of property owners, which are contiguous to the property under consideration according to the last assessment roll:

- 1.** _____
- 2.** _____
- 3.** _____
- 4.** _____

The plans and specifications relating to this appeal have been filed with the Zoning Inspector and are incorporated with this appeal.

The foregoing statements are true to the best of my knowledge and belief.

Appellant's Signature