

**APPEAL FORM/ZONING BOARD OF APPEALS**

Applicant: \_\_\_\_\_

Phone: \_\_\_\_\_

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

City/State: \_\_\_\_\_

1. I request an appeal made pursuant to a determination and/or interpretation of the Zoning Administrator's (see attached). The Section of the Zoning Ordinance of which this appeal is made is **section** \_\_\_\_\_ .
2. **Section** \_\_\_\_\_ states as follows: (see attached applicable section)
3. If this appeal involves a specific parcel please provide parcel # \_\_\_\_\_
4. This appeal is made for the following reasons:
  1. \_\_\_\_\_  
\_\_\_\_\_
  2. \_\_\_\_\_  
\_\_\_\_\_
  3. \_\_\_\_\_  
\_\_\_\_\_

A filing fee of \$75 must accompany this application to offset public notice requirements and meetings costs.

\_\_\_\_\_  
**Applicant/Owner**

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

Zoning Administrator's Comments:

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