

**PLANNING COMMISSION
APPLICATION FOR ADMINISTRATIVE APPEAL**

STAFF USE ONLY

Computer Generated No.: _____

Petition No.: _____ - _____ VZ

Project Name:	
Parcel Identification No.:	
Parcel Size:	
Address:	
Ownership and control of property involved:	

Being the owner or agent of the parcel of land above, I hereby appeal the order, requirement, decision or determination of the Zoning Administrator with reference to:

and hereby petition reversal or modification of the decision of the Zoning Administrator dated _____ for the following reasons (attach as necessary):
(Please provide a detailed narrative providing justification for the variance requested)

Application must be accompanied by a \$216 filing fee.

Applicant's (Owner/Agent) Signature: _____ **Date:** _____

Property Owner's Name (and Title):	
Telephone:	
Mobile / Fax:	
E-mail:	
Mailing Address:	

Provide notice of Name, Title and Certifications/Licenses of those preparing professional services including Architectural, Engineering, Legal, Planning and Surveying. (Attach agent authorization letter.)

Agent's Name (and Title):	
Telephone:	
Mobile / Fax:	
E-mail:	
Mailing Address:	

Agent's Name (and Title):	
Telephone:	
Mobile / Fax:	
E-mail:	
Mailing Address:	