



Board of Appeals Hearing Application

Provide All Information Fill in All Blanks

Project Name: _____

Project Address: _____

Parcel No: _____ **Subdivision & Lot or Suite No:** _____

Property Owner: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone No: _____

Fax: _____ Email: _____

Applicant: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone No: _____

Fax: _____ Email: _____

Requirements for filing an appeal

The application shall bear the name, address, and signature of the applicant, along with a description of the matter in sufficient detail to provide reasonable notice to the Board of the issues to be presented. Applications for appeal shall be made within twenty (20) days of the date of the decision which is being appealed, and not thereafter.

The Board shall hold the hearing and arguments relating to an appeal within thirty (30) days of the date of the application.

A notice of the time, date, place, and general purpose of the hearing shall be posted at City Hall at least five (5) days prior to the date of the hearing. Failure to receive notice shall not invalidate the proceedings.

An appeal may be withdrawn at any time prior to opening of the hearing by the party filing the appeal upon written notice filed with the Chief Building Official. After opening of the hearing, the appeal may only be withdrawn upon the consent of a majority of the Board present at such hearing.

No appeal that has been denied by the Board shall be further considered in a new appeal resulting from the filing of new plans and the obtaining of a new decision from the Chief Building Official, unless such plans materially change the nature of the case, and in any case, the Board shall reserve the right to refuse to consider another application on the same matter within one (1) year from the date of hearing on the previous application.

Applicant Signature

Print Name

Date

Received By

Date

Date of Board Meeting

Scheduled By

Date

Date Notice Posted

Posted By

Date

Project Name: _____

Project Address: _____

Decision of Chief Building Official to be appealed:

Position of the Owner/Applicant:

Use this form or provide the required information on separate sheets.

Please identify sheets with the Project Name and Address.

Attach additional sheets as necessary.