



# GATES COUNTY PLANNING AND ZONING

## Board of Adjustment Application for Interpretation or Appeal

Date Submitted: \_\_\_\_\_ Fee/Receipt # \$500.00 / \_\_\_\_\_ Case Number \_\_\_\_\_

### PROPERTY INFORMATION

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Tax Parcel# \_\_\_\_\_ Zoning: \_\_\_\_\_

Plat Book & Page \_\_\_\_\_ Deed Book & Page \_\_\_\_\_ Township \_\_\_\_\_

### OWNER INFORMATION

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

Owner Signature \_\_\_\_\_

*I certify that all information presented by me in this application is accurate to the best of my knowledge, information, and belief.*

### APPLICANT INFORMATION – *If not property owner, a notarized statement of permission is required from the property owner.*

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

Applicant Signature \_\_\_\_\_

*I certify that all information presented by me in this application is accurate to the best of my knowledge, information, and belief.*

### TYPE

### SECTION NUMBER

- Interpretation of Enforcement Officer \_\_\_\_\_
- Decision of Enforcement Officer \_\_\_\_\_
- Nonconforming Use Continuance \_\_\_\_\_

TO THE GATES COUNTY BOARD OF ADJUSTMENT:

I, \_\_\_\_\_, hereby appeal to the Gates County Board of Adjustment for the following action:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

