**ADMINISTRATIVE OFFICIAL APPEAL GUIDE AND APPLICATION**

***APPLICATION CHECKLIST:***

1. Completed **application form**.

2. **Application fee: $100.00**. The appeal application shall not be accepted unless the fee is paid in full at the time of application.

***PROCEDURE:***

1. The Application should be filed at City Hall. A completed application must be provided for the appeal to be considered. Such application must be made within thirty (30) days of the decision made by the Administrative Official. See the application checklist above for a list of items needed to complete an application. No application will be accepted without payment-in-full of the application fee.

1. City staff will review the application and set a date for a public hearing for the appeal, typically at the next regularly scheduled Board of Adjustment meeting. The public hearing is conducted to allow the public to comment on the appeal application.

3. Notice of the public hearing must be posted in the newspaper at least one time not less than 7 days in advance of the public hearing. The applicant is responsible for covering the cost of the publication and placing the ad for the notice.

4. The Board of Adjustment shall hold a public hearing on the appeal and may affirm, reverse, or modify the decision made by the Administrative Official. The Board of Adjustment shall consider all the facts presented in determining whether the Administrative Official was correct in carrying out the provisions of the zoning code.

**ADMINSTRATIVE OFFICIAL APPEAL**

**APPLICATION**

Petitioner Name/Signature:

Spouse

Name/Signature:

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

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

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Property Address:

Administative Official Decision:

Reason for Disagreement with Decision: