



BOARD OF ADJUSTMENT APPLICATION USE ON REVIEW

Property Address _____

Use On Review Requested _____

For a Use on Review to be granted, a non-self-imposed hardship must be shown. Explain your hardship:

Applicant Name _____
Address _____
Phone Number _____
Email Address _____

Title Holder's (If different than applicant)

Name _____
Address _____
Phone Number _____

Signature of Applicants (s) _____

Signature of Title Holder(s) _____
(if different than applicant) _____

On 8 1/2" x 11" paper, please provide the following:

- a. A scale accurate drawing showing the property location and boundary lines
- b. A scale accurate site plan showing developed features on the site and location of any requested variances

For office use only

Amount Due \$ 150 _____

Filing Fee Paid \$ _____

Payment Method _____

Date Filed _____

Publication Date _____

Hearing Date _____