Board of Zoning Appeals meetings are held every $2^{\rm nd}$ and $4^{\rm th}$ Tuesday of the month at 3:30 p.m. in the council chambers on the second floor.

COMPLETED APPLICATIONS ARE DUE TWO (2) WEEKS PRIOR TO MEETING. Applicant(s) will be notified if your application is scheduled on the agenda.

Office Use only				
Date Filed				
Date of Meeting				

APPLICATION FOR APPEAL

CITY OF TROY BOARD OF ZONING APPEALS

(MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK)

	(Street Address) in a				
(P	Parcel Identification Number) (Zoning District)				
	OWNER APPLICANT				
Name	Name				
Address	Address				
City	City				
	State				
	Zip Code				
	Phone No.				
	Fax No.				
	Email				
The applicant is the of the property, which is subject to this application. (State the interest of the applicant)					
(OFFICE USE ONLY) PLEASE PROVIDE THE FOLLOWING REQUIRED DOCUMENTS:					
EXHIBIT A	Denied Zoning Permit Application: Application submitted by the applicant for a Zoning Certificate which was denied by the Zoning Administrator. Attach as EXHIBIT "A"				
EXHIBIT B	2. Letter of Order or decision by the Zoning Administrator. Attach as EXHIBIT "B"				
EXHIBIT C	Site Plan: Actual dimensions of subject property according to recorded plat of such property. Also include the present zoning district, use, height, location and ground area of all existing and proposed buildings, off-street parking, vehicular entrances and exits, signs, landscaping, and any other uses appropriate for said application. Attach as EXHIBIT "C" Property Owner List: Identify the city lot number for each property, the property owner's name,				
EXHIBIT D	property address, and the <i>property owner's address</i> (this may be different from property address – check with the County Auditor tax list) of all contiguous properties beginning with the subject property (SEE EXAMPLE). NOTE: THE PROPERTY OWNER'S LIST AND MAP CAN BE OBTAINED FROM THE COUNTY PROPERTY TAX RECORDS (TAX MAPS). Attach as EXHIBIT "D"				
EXHIBIT E	Property Owner Map: Identify on a map (using a scale of one (1) inch = 100 feet) the owners of property abutting the applicant's property, and owners of property directly across any street or alley, as they shall appear on the notice of appeal. Attach as EXHIBIT "E"				
Copies	6. One (1) complete application sets (Exhibits A-E) in a reproducible format no larger than 11"x17"				
Labels	7. One (1) set of mailing labels of the "property owners address"				
Map(s)	8. One (1) copy of county tax map(s)				
Filing Fee	9. Check issued to City of Troy for \$200.00				

PLEASE READ CAREFULLY AND ANSWER THE FOLLOWING ITEMS AS FULLY AS YOU CAN. USE SEPARATE SHEET(S) IF NEEDED. READ ATTACHED SECTIONS 1135.04 THROUGH 1137.08 OF THE ZONING CODE BEFORE COMPLETING APPLICATION.

(1) List the particular section(s) of the Zoning Code which pertain to this appeal. (For example, Section 1143.08(f)(Rear yard setback)
(2) State the decision of the Zoning Administrator with respect to the interpretation of the above sections of the Zoning Code (see denial letter for reference).
(3) State clearly your appeal of the Zoning Administrator's interpretation of the Zoning Code. Enumerate each section of the Zoning Code as necessary (be as specific as possible).

I HEREBY DEPOSE AND SAY THAT THE ABOVE STATEMENTS AND THE STATEMENTS CONTAINED IN ALL THE EXHIBITS PREPARED BY ME AND TRANSMITTED HEREWITH ARE TRUE.

		_		
				(Applicant Signature
Subsc	cribed and sworn to before me this	day of	, 20	
	My Commission Expires	(Month/Date/Year)		
		-		(Notary Public
		(Office Use Only - Do Not Write B	elow This Line)	
DIS	SPOSITION OF BOARD OF ZONING APPEALS:			
			PUBLIC HEARING DATE	
-			DATE OF DECISION	
Apj	proved: Denied:		DECISION OF THE BOARD	
-			AMENDED / CONDITIONS ATTACHED	
1				

Revised 12/20/17