COUNTY OF DAVIDSON STATE OF NORTH CAROLINA
APPLICATION TO THE BOARD OF ADJUSTMENT
and/or BOARD OF COMMISSIONERS FOR A HEARING

APPLICATION NO. _____

Applicant(s):_____ Date _____

Address: _____Telephone No.:_____

Property Owner:_____

Address:_____Telephone No.:_____

Property Location (General Description)_____

_____

_____

Township: _____Map No. _____ Blk. No._____Lot(s)_____

TYPE OF APPLICATION

☐ Appeal from an action of the Zoning Officer and/or petition for an interpretation of the Zoning Ordinance

☐ Special Use, Class _____

☐ Variance

Legal Advertisement:_____

_____

_____

_____

_____

_____

_____

_____

Planning Board Meeting Date: _____ Public Hearing Date:_____

Planning Board Recommendation:_____

Signature, Applicant(s) _____

Fee Paid Receipt No.

COUNTY OF DAVIDSON
STATE OF NORTH CAROLINA

APPEAL FROM AN ACTION OF THE ZONING ENFORCEMENT OFFICER and/or
PETITION FOR AN INTERPRETATION OF THE ZONING ORDINANCE

APPLICATION NO._____ _____
Month Day Year

TO THE DAVIDSON COUNTY BOARD OF ADJUSTMENT

I _____ hereby appeal to the Board of Adjustment from the following adverse decision of a Zoning Enforcement Officer of the Planning Department: _____

_____

_____

_____

This adverse decision was made with respect to property described in the attached form entitled "Application for a Hearing".

I _____ hereby request an interpretation of:

( ) the Zoning Map
( ) the following section(s) of the text of the Ordinance:

_____

in so far as the Map and/or the Ordinance relate to the use of the property described in the attached form entitled "Application for a Hearing".

STATEMENT BY APPELLANT: (In the space provided below, or on the back of this form, present your interpretation of the Ordinance provisions in question and state what reasons you have for believing that your interpretation is the correct one. In addition, state what facts you are prepared to prove to the Board of Adjustment that should lead the Board to conclude that the decision of the Zoning Enforcement Officer was erroneous.) _____

_____

_____

_____

STATEMENT BY THE PLANNING DEPARTMENT STAFF:

(1) The staff believes that the Ordinance sections in question should be interpreted as follows: _____

_____

_____

(2) The reasons for the above stated interpretation are as follows: _____

_____

_____

_____

(3) Based upon this interpretation of the Ordinance, Appellant was denied a permit. For the following reasons, and based upon the following facts which the staff is prepared to demonstrate to the Board, the decision of the Zoning Enforcement Officer should be upheld: _____

_____

_____

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

_____
Signature of Applicant