

B.Z.A.

Board of Zoning Appeals

Date Filed _____

Hearing _____

Application for: _____ Administrative Review*
_____ Variance*
_____ Use on Review*

<u>Applicant</u>	<u>Owner(s) (Attach list if needed)</u>	<u>If applicant is other than owner, nature of relationship</u>
Name _____	_____	_____
Address _____	_____	_____
_____	_____	_____
Phone _____	_____	_____

PROPERTY IDENTIFICATION:

Parcel No. _____ Tax Map No. _____ Zoning District _____

Address _____

Size _____ Acres or Sq.ft. _____

Use: _____ New _____ Existing _____ Addition _____ Occupied: _____ Y _____ N

ACTION REQUESTED

Proposed use (Use on Review only) _____

Action Requested of BZA _____

Why Needed _____

Is Request: (Yes/No)

_____ Based on physical conditions of property
_____ Minimum adjustment to allow reasonable use (If not, why?)

PREVIOUS ACTION BY TOWN.:

Denial of Permit for _____ Building _____ Or _____ Sign (attach copy)

Reason _____

Other _____

INFORMATION FURNISHED:

Required: _____ Denial from building inspector **Additional:** _____

_____ Site Plan _____

CERTIFICATION:

Applicant : I / We certify that the above information is complete and accurate

Signature _____ Date _____

Signature _____ Date _____

BOARD OF ZONING APPEALS ACTION

Granted _____ Granted subject to these conditions: _____

Denied _____

Reasons (s) _____

*Please review Section 8-900 of the Townsend Zoning Regulations and Tennessee Code Annotated § 13-7