



Application No. _____ Date _____

**TOWN OF HARRISBURG
PETITION FOR AN APPEAL OF THE ZONING ADMINISTRATOR'S DECISION**

In order to request an appeal of a decision made by the zoning administrator, please submit the following application and appropriate fee to the Town of Harrisburg Planning & Zoning Department. **If there are additional questions concerning this process, please call the Zoning Office at (704) 455-5614.** Town Offices are open from 8am to 5pm Monday through Friday.

To the Board of Adjustment:

I _____, hereby appeal to the Board of Adjustment, the following decision of the Zoning Administrator:

I _____, hereby request an interpretation of:

_____ The Zoning Atlas

_____ The following section(s) of the text of the Ordinance:

Insofar as the Atlas and/or the Ordinance related to the use of the property located at:

Address

PIN

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 the Board conclude that the decision of the Zoning Administrator was erroneous.

Statement by the Zoning Administration Department Staff:

- The staff believes that the Ordinance section(s) in question should be interpreted as follows:

- The reasons for the above stated interpretation are as follows:

- Based upon this interpretation of the Ordinance, the 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 Administrator should be upheld:

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

Represented By

Signature of Appellant

Address

Address

Phone Number Phone Number
