

**NOTICE OF APPEAL TO THE BACKUS TOWNSHIP ZONING BOARD OF APPEALS**

Appeal No. \_\_\_\_\_ Date of Appeal \_\_\_\_\_

Appellant: \_\_\_\_\_

Address: \_\_\_\_\_

**Instruction to appellant: Fill in appropriate Section 1, 2, 3, or 4. Do not fill in more than one of these sections. This application is not acceptable unless all required statements have been made. Additional information may be supplied on separate sheets if the space provided on this form is inadequate.**

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The following is an appeal from a determination made by the zoning ordinance-enforcing officer on the following date:

\_\_\_\_\_  
DATE

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**SECTION 1. INTERPRETATION**

The appellant respectfully requires that an interpretation be made by the Board of Appeals of Article \_\_\_\_\_ Section \_\_\_\_\_ of the Backus Township Zoning Ordinance.

- An appeal is made for an interpretation of the zoning map. An interpretation is requested for the following reason:

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**SECTION 2. ADJUSTMENT**

- Appellant respectfully request that an adjustment of the terms of the Zoning ordinance be made in the case of his property because the following peculiar or unusual conditions are present which justify an adjustment:

The following unnecessary hardship will result if the adjustment is not made:

CONTINUE

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**SECTION 3. SPECIAL EXCEPTION**

- The appellant respectfully requests that the following special exception Be made to enable him to use his property in the following manner:**

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**Article \_\_\_\_\_ Section \_\_\_\_\_ of the Backus Township Zoning Ordinance authorized the Board of Appeals to make the special exception requested:**

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**SECTION 4. ORDINANCE PROVISIONS**

- The appellant respectfully petitions that the following request be approved:**

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\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_  
Date

I hereby grant permission for members of the Backus Township zoning Board/Board of Zoning Appeals, Backus Township Board and Backus Township Zoning Administrator to enter the above-described property for the

purpose of gathering information related to this application. (Note to applicant: This permission is optional and failure to grant permission will not affect any decision on your application.)

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Signature of Applicant

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Date

**THIS NOTICE OF APPEAL TO THE BACKUS TOWNSHIP ZONING BOARD OF APPEALS MUST BE FILLED OUT AND RETURNED TO THE TOWNSHIP ZONING ADMINISTRATOR WITH A CHECK FOR \$450.00 MADE PAYABLE TO BACKUS TOWNSHIP.**