



Fee \$70.00

Appeal No. _____

Date _____ 20____

NOTICE OF APPEAL
TO
ZONING BOARD OF ADJUSTMENT
City of Groves, Texas

APPLICANT _____

(Name)

(Mailing Address)

APPLICANT'S INTEREST IN PROPERTY _____

(Owner, agent, lease, option, etc.)

Request is made herewith to the Board of Adjustment for a determination on the following appeal which was denied by the Building Official on _____ 20____, for the reason indicated below:

IT IS REQUESTED THAT THE BOARD:

- () Make an interpretation of the Zoning Ordinance, or Map.
- () Grant Special Exception or Temporary Use Permit.
- () Grant a Variance relating to () area; () frontage; () yard; () height () parking () other _____

The description, location of property involved in this appeal is:

(Street Address)

(Lot Size)

(Lot Number or Numbers)

(Block Number)

(Addition)

Present Use _____, Present Improvements upon land _____

Proposed Use _____

The Applicant believes that the Board of Adjustment should approve this request because: (Indicate grounds for appeal or reasons for granting, both with respect to law or facts) _____

Has any previous application or appeal been filed on these premises? Yes ___ No ___

I hereby certify that all the above information and that contained in any supporting documents submitted herewith are true and accurate to the best of my knowledge and belief.

Date _____ 20____

Signature _____