

Appellant Information

All administrative appeals are made to the Owensboro Metropolitan Board of Adjustment. **Use this form** to appeal allegations of error or claims of grievance regarding zoning administration and/or enforcement actions (itemized at bottom of this page). **Use Form 190N** to propose changes to non-conforming uses and/or structures where authorized by Article 4 of the Zoning Ordinance.

IMPORTANT: Legal counsel has advised that all information and exhibits regarding this appeal shall be attached to this submittal or presented to the Board of Adjustment at the public hearing. Direct individual contact with board members should not occur.

Date received by Planning Office

Subject Property IF SPECIFIC PROPERTY INVOLVED

Street
Address

Acreage

Please check one:

- PROPERTY OUTSIDE Whitesville city limits:** Submit **one (1) copy** of all appeal materials. See table at top right for required appeal materials.
- PROPERTY INSIDE Whitesville city limits:** Submit **two (2) copies** of all appeal materials. See table at top right for required appeal materials.

Appellant

Name, Address

Day Telephone

Appeal prepared by

Name, Address

Day Telephone

Appeal Materials to Submit

| ITEMS | FORM |
|---|------------------------|
| Appellant Information | Complete on this sheet |
| Filing Fee | Attach sheet |
| Appellant Certification | Attach sheet |
| Description of the Appeal Regarding Zoning Administration / Enforcement Actions | Attach sheet |

Filing Fee PLEASE CHECK PROPERTY ZONE

| | | | |
|--------------------------|--------------|------------------------------|-------|
| <input type="checkbox"/> | A-R | Rural Agriculture | |
| <input type="checkbox"/> | A-U | Urban Agriculture | |
| <input type="checkbox"/> | MHP | Manufactured Housing Park | |
| <input type="checkbox"/> | R-1A | Single-Family Residential | \$75 |
| <input type="checkbox"/> | R-1B | Single-Family Residential | |
| <input type="checkbox"/> | R-1C | Single-Family Residential | |
| <input type="checkbox"/> | R-1T | Townhouse | |
| <input type="checkbox"/> | R-2MF | Multi-Family Residential | |
| <input type="checkbox"/> | R-3MF | Multi-Family Residential | \$110 |
| <input type="checkbox"/> | R-4DT | Inner-City Residential | |
| <input type="checkbox"/> | P-1 | Professional/Service | |
| <input type="checkbox"/> | B-1 | Neighborhood Business Center | |
| <input type="checkbox"/> | B-2 | Central Business | |
| <input type="checkbox"/> | B-3 | Highway Business Center | \$150 |
| <input type="checkbox"/> | B-4 | General Business | |
| <input type="checkbox"/> | B-5 | Business/Industrial | |
| <input type="checkbox"/> | I-1 | Light Industrial | |
| <input type="checkbox"/> | I-2 | Heavy Industrial | |
| FILING FEE | | | \$ |

PLEASE TYPE OR PRINT

Appellant Certification

By the Appellant: I do hereby certify that, to the best of my knowledge and belief, all appeal materials are herewith submitted, and the information they contain is true and correct. I further certify that I accept responsibility for payment of advertising costs relating to this appeal and fully understand that I will be billed at a later date by the *Messenger-Inquirer*.

| | |
|--|------|
| Appellant's Signature | Date |
| By: _____ | |
| _____ | |
| <i>(Please type or print name below signature)</i> | |

**Description of the Appeal
Regarding Zoning Administration / Enforcement Actions**

ON AN ATTACHED SHEET, please clearly and accurately describe the allegation of error in an order, requirement, decision, grant, or refusal made by an administrative official in the enforcement of the zoning regulations; and/or the claim to be injuriously affected or aggrieved by an official action, order, requirement, interpretation, grant, refusal, or decision of any zoning enforcement officer.