

# APPEAL

Case#: _____-_____-_____
Proj. Name: _____ (Fee Agreement)

*Must be submitted within 10 days from the date of the Town action being appealed.*

APP.	TOWN
<input type="checkbox"/> Application Fee; CK#: _____; Amt: \$ _____ <i>(to be refunded if appeal is granted)</i>	<input type="checkbox"/>
State the specific Town action and the date of the action being appealed: _____ _____	
Describe request/problem and other mitigating factors (attach any additional materials): _____ _____ _____ _____ _____ _____ _____	

*Submit a copy of this form, any attachments, and a completed Land Use Application.*

**Date Submitted to Town:** \_\_\_\_\_

## TOWN CERTIFICATION OF COMPLETED APPLICATION

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Notice of Appeal</b> Town Clerk will forward a copy of the notice of appeal to the Planning Staff or other appropriate administrative officer, to prepare a record of the Town action being appealed for consideration by the Board of Adjustment.	<input type="checkbox"/>
<b>Set Public Hearing and Complete Public Notification</b> Town Clerk must publish notice in a newspaper of general circulation. The hearing may be held no less than 30 days from the date of advertising.  Date of Public Hearing: _____	<input type="checkbox"/>
<b>Board of Adjustment (BOA) Public Hearing and Action</b> The BOA will make the decision on appeals at the regular meeting of the BOA set for Public Hearing. The decision will be based on appeal review criteria (§16-3-9.F.).  Decision: _____ Date: _____	<input type="checkbox"/>