

APPLICATION FOR APPEAL

BOONE COUNTY APPEALS BOARD

2950 Washington Street, Box 960 Burlington, Kentucky 41005

Phone: 859-334-2219 Fax: 859-334-3137

NAME OF PROJECT:	
ADDRESS OF PROJECT:	
PROJECT IS:	NEW CONSTRUCTIONADDITION/ALTERATION
PROJECT ARCHITECT/ENG	GINEER:
	JURISDICTION:
	Johnson
APPEAL SUBMITTED BY:	OWNER AGENT
NAME:	
ADDRESS	
	FAX: EMAIL:
OWNER:	
ADDRESS:	
PHONE:	FAX: EMAIL:
CODE INTERPRETATION I	MADE BY: (INSPECTOR NAME)
PLANS REVIEWED BY: (IN	NSPECTOR NAME)
ISSUE BEING APPEALED:	(Cite code sections and provisions; describe facts briefly)
A TERRALA TIMES DRODOSE	
ALIEKNATIVES PROPOSE	D:
STATUS OF PROJECT:	
_	
	IT FIFTEEN (15) COPIES OF DRAWINGS AND/OR
APPLICATIONS	SHOWING THE ISSUE BEING APPEALED ALONG WITH THIS
III I LICIII CI	
DATE OF APPLICATION	SIGNATURE OF APPELLANT
AFFIDAVIT OF OWNER	the control of the co
I,, hereby authorize to represent me in my absence at the appeals hearing for the above referenced project.	
OWNER SIGNATURE	NOTARY PUBLIC
	My commission expires: MUST BE PRESENT AT THE HEARING TO REPRESENT THE OWNER OF THE PROPERTY OR
THIS MATTER WILL NOT BE HEARD. IF OWNER'S AGENT WILL BE PRESENT, THE ABOVE AFFIDAVIT MUST BE COMPLETED AT TIME OF APPLICATION.	

RECEIVED BY BOARD SECRETARY: ____