

**APPLICATION  
CITY OF PORT WENTWORTH ZONING BOARD OF APPEALS**

Date Filed: \_\_\_\_\_

Project #: \_\_\_\_\_

The **APPLICATION** and all **SUPPORTING DOCUMENTS** with the **REQUIRED PLOT PLAN** must be submitted to the Department of Development Services.

**PLEASE PRINT OR TYPE:**

Name of Applicant: \_\_\_\_\_

Property Owner (if different from applicant): \_\_\_\_\_

**\*\*\* Authorization of Property Owner Form required if Applicant and property owner is not the same. \*\*\***

Property Location: \_\_\_\_\_

Address/Street Name

Lot Number

Subdivision/Ward: \_\_\_\_\_ Zoning District: \_\_\_\_\_

**NAMES, MAILING ADDRESSES** and **PIN #'S** of property owners within 300 feet of the property line. Include those directly across a public right-of-way. Use additional sheet if necessary.

NAME	ADDRESS	PIN #
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**REASON FOR APPEAL:** Check appropriate section(s).

- ( ) A decision of the Zoning Administrator which the applicant believes to be contrary to the meaning of the Zoning Ordinance.
- ( ) An application to establish a use which must be approved by the Board of Appeals.
- ( ) A request to vary:
  - ( ) \_\_\_ foot \_\_\_ yard variance
  - ( ) \_\_\_ lot area variance
  - ( ) Fence variance
  - ( ) \_\_\_ lot width variance
  - ( ) \_\_\_ setback variance
  - ( ) \_\_\_% building coverage variance
- ( ) A request for extension of a non-conforming use.
- ( ) Other: \_\_\_\_\_

