

APPLICATION FOR APPEAL
Kearney County, Nebraska

Date _____ Filing Fee: \$100.00
Property Owner's Name _____
Address _____
Home Phone _____ Work Phone _____

Appeal submitted by _____
Address _____
Phone _____ Relationship to Property Owner _____

Application for Appeal is hereby made for the following decision

Decision was made by _____
Date Decision was made _____

Legal description of real estate for which appeal may affect:
Section _____ Township _____ Range _____ Lot No. _____
Lot Size _____ (Sq. Ft./Acres) Zoning District _____

Other Information:

Please submit any documentation (maps, permits, corresponding letters, etc.) that may relevant in this matter.

I hereby certify that I have the legal authority to file this application, that I have completed and examined this application and know the same to be true and correct. I understand that an Appeal of the Board of Adjustment requires a public hearing and that any appeal decision may, in turn, be appealed to District Court. Denial of any appeal by the Board of Adjustment constitutes accuracy in the order, requirement, decision, or refusal made by an administrative official or agency based on or made in the enforcement of any zoning regulation or any regulation relating to the location or soundness of structures.

Application's Signature _____
Mailing Address _____

OFFICE USE ONLY

Appeal No. _____

\$50 Application Fee Paid: _____yes _____no

Application received on _____

Board of Adjustment public hearing notice was published at least ten (10) days prior to such public hearing _____yes _____no

Board of Adjustment public hearing was held and action was taken in accordance with the adopted Bylaws and Rules of Procedure _____yes _____no

Action by the Board of Adjustment
_____Approved _____Disapproved

Reason(s) for decision

Notice of Decision of Board of Adjustment mailed to applicant on
_____.

Signature of Zoning Administrator