

**HENDERSON COUNTY BOARD OF ZONING  
ADJUSTMENT APPEAL APPLICATION**

**HENDERSON COUNTY CODES ADMINISTRATION – 1990 Barrett Ct. Suite C - PHONE (270) 827-6030**

\_\_\_\_\_ CONDITIONAL USE PERMIT \_\_\_\_\_

\_\_\_\_\_ VARIANCE \_\_\_\_\_

\_\_\_\_\_ BUILDING INSPECTOR'S  
INTERPRETATION \_\_\_\_\_

APPLICATION DATE \_\_\_/\_\_\_/\_\_\_ HEARING DATE \_\_\_/\_\_\_/\_\_\_ APPEAL NUMBER \_\_\_\_\_

PROPERTY LOCATION \_\_\_\_\_ ZONED \_\_\_\_\_

**THE FOLLOWING IS REQUIRED:**

- 1. SITE PLAN**
- 2. ADJACENT PROPERTY OWNER'S NAMES AND ADDRESSES**
- 3. AN APPLICATION FEE OF \$40.00**
- 4. A LAND USE RESTRICTION FILING FEE OF \$16.00 (REFUNDABLE IF APPEAL DENIED)**

PROPERTY OWNER: \_\_\_\_\_

NAME \_\_\_\_\_

MAILING ADDRESS/CITY/STATE/ZIP CODE \_\_\_\_\_

DAYTIME TELEPHONE \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

\_\_\_\_\_  
Signature: Property Owner

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

Transmitted by: \_\_\_\_\_  
Code Administrator

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

Received by: \_\_\_\_\_  
Secretary, Board of Zoning Adjustment

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

DECISION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE FILED IN COUNTY CLERK'S OFFICE \_\_\_/\_\_\_/\_\_\_

**APPLICANT MUST BE PRESENT AT BOARD OF ZONING ADJUSTMENT MEETING**

