

City of Marquette

Zoning Board of Adjustments
Appeal/Variance/Special Exception Permit Request

Applicant Name: _____

Property Owner (if different): _____

Property Address: _____

Property Description: _____

Date Original Building Permit Application Filed: _____

Grounds for Appeal/Variance/Special Exception Request (site sections of zoning code that are applicable to your request): _____

Names & Addresses of Adjoining Property Owners: _____

Do these adjoining property owners support your request? YES NO

Signature: _____ Date: _____

***Attach copy of completed original building permit request form (if applicable).**

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Date Received: _____, 201__ Clerk Initial: _____

Fee Paid (\$50.00): YES NO

Zoning Administrator Notified _____ (date)

Date set for Zoning Board of Adjustments Hearing? YES NO _____ (date)

Notice of Public Hearing Published? YES NO