CRAWFORD COUNTY ZONING

DUANE ZENK, ZONING ADMINISTRATOR

P.O. Box 444 ~ Denison, IA 51442 Phone: (712) 263-3447 Account # 0001-1-10-6300-5020000

APPEAL TO THE ZONING BOARD OF ADJUSTMENT

Applicant			Date
Address			
			Phone: ()
Application is hereby made to the Board of Adjustment for:			
	Interpretation of the zoning ordinance	or map	(Sec. 2.15-1)
	Special exception to the ordinance		(Sec. 2.15-2)
	Variance from the ordinance requirem	ents	(Sec. 2.15-3)
The purpose of this appeal is to permit:			
Legal description of the property affected:			
Lot of Trac	ct Area:	Estimate	d Cost:
Front Yard:		Zoning District:	
Side Yard:		Height:	
Rear Yard:		Off-Street Loading:	
Principal Use:			
Accessory Use:			
Other information: Attach supporting data required by Section 2.15 (2) or 2.15 (3)			
Signed:			
Applicant			