



2201 Miller Road, South | POB 1728 | Wilson, NC 27894-1728 | 252.399.2965

# APPLICATION FOR APPEAL/INTERPRETATION OF ACTION OF THE ORDINANCE ADMINISTRATOR TO THE BOARD OF ADJUSTMENT WILSON COUNTY, NORTH CAROLINA

	Date	
Applicant's Name:		

#### 1. GENERAL STATEMENT OF APPEAL

I (We), the undersigned, do hereby appeal to the Wilson County, North Carolina Board of Adjustment from the decision of the Ordinance Administrator of the Department of Development Services, outlined below:

#### 2. REQUEST FOR INTERPRETATION

This decision was made with respect to the property described in the attached General Application For Hearing Before the Board of Adjustment. I (We), the undersigned, request an interpretation of (see below) to the extent that it relates to the property described in the attached Board of Adjustment Hearing Request Application.

**Zoning Map** 

The following section(s) of the Unified Development Ordinance:

### 3. STATEMENT BY THE APPELLANT

On a separate attachment, present your interpretation of the Ordinance provisions in question and state what reasons you have for believing your interpretation is correct.

## 4. CERTIFICATION

I (We) hereby certify that the information furnished in this application is accurate to the best of my (our) knowledge. **Applications must be signed by the property owner(s) or their duly authorized agent or attorney.** Please attach an additional sheet if necessary.

Property Owner: \_\_\_\_\_Phone: \_\_\_\_\_

Signature:	
Mailing Address:	
Email Address:	
Property Owner:	Phone:
Signature:	
Mailing Address:	
Email Address:	
Agent/Attorney:	Phone:
Signature:	
Mailing Address:	
Email Address:	
	ication must be accompanied by a GENERAL APPLICATION BEFORE THE WILSON COUNTY BOARD OF ADJUSTMENT
	OFFICE USE ONLY
Received on:	by
Case Number Assigned:	
Total Fees Collected: \$	Paid by