



CITY OF
Siloam Springs
It's a natural

APPEAL FROM PLANNING AND ZONING COMMISSION APPLICATION REQUEST

NOTE: COMPLETE SECTIONS IN WHITE.

| | | |
|---------------|------|-------------|
| Application # | Date | Reviewed By |
|---------------|------|-------------|

Subject Property Address _____

Applicant Name _____ Address _____
 Phone _____ Fax _____ E-mail _____

Owner/Developer _____ Address _____
 Phone _____ Fax _____ E-mail _____

Surveyor _____ Address _____
 Phone _____ Fax _____ E-mail _____

Agent for Owner _____ Address _____
 Phone _____ Fax _____ E-mail _____

Zoning District _____
 Present Use _____ Proposed Use _____

| Legal Description | Lot | | Block | | Addition | |
|---------------------------|-------|-------|-------|------|----------|--|
| Surrounding Zoning | North | South | East | West | | |
| Specific Action Requested | | | | | | |

| | | |
|--------------------|----------------------------------|--------------|
| Application Fee | Account Number: 08-01-475000-000 | Cost \$50.00 |
| Legal Notification | Site Plan | 5 Copies |

APPLICANT: I THE UNDERSIGNED APPLICANT, DO HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAW AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW.

SIGNATURE: _____ **DATE:** _____

| | |
|---------------|--------|
| BOD APPROVED | DENIED |
| BOD SIGNATURE | |

PLEASE RETURN THE ORIGINAL TO THE COMMUNITY DEVELOPMENT DEPARTMENT