

**APPLICATION TO APPEAR BEFORE**  
**THE TIPTON COUNTY BOARD OF ZONING APPEALS**

**PLEASE SUBMIT EIGHT (8) COMPLETE SETS OF THE FOLLOWING:**

1. LOCATION OF PROPERTY:

- A. ROAD ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_
- B. AREA IN ACRES: \_\_\_\_\_ ZONING: \_\_\_\_\_
- C. MAP #: \_\_\_\_\_ GROUP: \_\_\_\_\_ PARCEL #: \_\_\_\_\_
- D. MAP OF THE PROPERTY (PLEASE ATTACH A SCALED DRAWING).

2. APPLICANT:

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ ALTERNATE PHONE # \_\_\_\_\_  
EMAIL: \_\_\_\_\_

3. REASON FOR APPLICATION:

- \_\_\_\_\_ VARIANCE (**\$200** APPLICATION FEE)
- \_\_\_\_\_ USE PERMITTED ON APPEAL (**\$100** APPLICATION FEE)
- \_\_\_\_\_ ADMINISTRATIVE REVIEW (NO CHARGE)

EXPLANATION: \_\_\_\_\_  
\_\_\_\_\_

I HEREBY CERTIFY THAT THE STATEMENTS ON THIS APPLICATION AND ANY MAPS, DRAWINGS OR OTHER ACCOMPANYING DATA SUBMITTED WITH THIS APPLICATION ARE TRUE AND CORRECT. ANY MISREPRESENTATION OF INFORMATION SHALL BE GROUNDS FOR REVOCATION OF ANY DECISION OF THE TIPTON COUNTY BOARD OF ZONING APPEALS.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DATE OF MEETING: \_\_\_\_\_ TIME: **5:00 P.M.**

**MEETING LOCATION: TIPTON COUNTY JUSTICE COMPLEX, 1801 S. COLLEGE ST.**  
**SOMEONE MUST BE PRESENT AT MEETING TO REPRESENT APPLICATION**

APPROVAL GRANTED: \_\_\_\_\_ MOTIONS: \_\_\_\_\_

APPROVAL DENIED: \_\_\_\_\_ CHAIRPERSON: \_\_\_\_\_

CHECK #: \_\_\_\_\_ CASH: \_\_\_\_\_ RECEIPT NO: \_\_\_\_\_

DATE PAID: \_\_\_\_\_ ACCEPTED BY: \_\_\_\_\_