

CITY OF FAIRFIELD BAY

APPLICATION TO BOARD OF ZONING ADJUSTMENT

Code Enforcement – Phone: 501-884-3130 Email: ffbc@artelco.com

PLEASE NOTE: The Building Official or the Board of Zoning Adjustment may require certain measurements, drawings, photos, etc. to clarify and support your request. Applicants must attend the hearing.

- This Application is for:**
- 1. Appeal from a decision of the Building Official.**
 - 2. Request for a Hardship Variance from the Zoning Code or larger building**
 - 3. Application for a One-Year Permit to keep a Recreation vehicle which does not conform to the Zoning Code.**

(Please circle one of the above)

Application No. _____

Applicant: _____ **Date:** _____ **Phone:** _____

Parcel Number _____

Lot, Block, and Subdivision of subject property _____

From which section of the Zoning Code are you appealing or requesting a variance? _____

Please explain briefly the reasons for requesting this Appeal, Variance or Permit _____

How would approval affect the neighboring property? _____

Hearing Date: (Will be supplied) _____

Decision of Board of Adjustment: _____

Date of Board Decision: _____ **Chairman:** _____

I hereby understand that the decision of the Board of Zoning Adjustments effects only the applicable elements of the City of Fairfield Bay Municipal Code. Any restrictions imposed by the applicable supplemental Covenants and Restrictions for your specific subdivision remain in effect. You take full responsibility for any deviation to the document.

Signature of Applicant _____

Date _____