

Notice of Appeal - Form 1
Board of Zoning Appeals
Town of Chapin, SC

Date Filed: _____ Permit Application No. _____ Appeal No. _____

Instructions

This form must be completed on a hearing on **appeal** from action of a zoning official, application for a **variance**, or application for **special exception**. Entries must be printed or typewritten. If the application is on behalf of the property owner(s), all owners must sign. If the applicant is not an owner, the owner(s) must sign the Designation of Agent.

An accurate, legible site plan showing property dimensions and locations of all structures and improvements must be attached to an application for variance or special exception. Please complete form and submit with **\$75 (residential)** or **\$150 (commercial) application fee**, made payable to Town of Chapin, PO Box 183, Chapin SC 29036.

THE APPLICANT HEREBY APPEALS [indicate one]:

- from action of a zoning official as stated on attached Form 2.
- for a variance as stated on attached Form 3.
- for a special exception as stated on attached Form 4.

APPLICANT(S) [print]: _____

Address: _____

Telephone: _____ [work] _____ [home]

Interest: _____ Owner(s): _____ Adjacent Owner(s): _____
Other: _____

OWNER(S) [if other than Applicant(s)]: _____

Address: _____

Telephone: _____ [work] _____ [home]

PROPERTY ADDRESS: _____

Lot _____, Block _____, Subdivision _____

Tax Map No. _____ Plat Book _____ Page, _____

Lot Dimensions: _____ Area: _____

Zoning District: _____ Zoning Map Page: _____

DESIGNATION OF AGENT [complete only if owner is not applicant]

I (we) hereby appoint the person named as Applicant as my (our) agent to represent me (us) in this application.

Date: _____
Owner signature(s)

I (we) certify that the information in this application and the attached Form 2, 3, or 4 is correct.

Date: _____
Applicant signature(s)