

If represented, please give the following information

Rep. Name: _____

Address: _____

Email: _____

Phone: _____

APPEAL NO: _____

NAME: _____

ADDRESS: _____

PHONE: _____

Email: _____

Zone: _____ Section: _____

**BOARD OF ADJUSTMENT - NOTICE OF APPEAL
ADMINISTRATIVE REVIEW**

I, _____, the undersigned hereby appeal to the Versailles-Midway-Woodford County, Kentucky, Board of Adjustment for authorization of a (Building Permit) or (Certificate of Occupancy) for the property located at _____, in accordance with the 1994 Amended Versailles-Midway-Woodford County Zoning Ordinance adopted and in force as of August 1994 and as subsequently amended.

Administrative Review appeal from Section _____ of the Zoning Ordinance by the Administrative Official. Explain how the Official's interpretation or decision has injuriously affected or aggrieved the appellant. (Such appeal shall be taken within thirty (30) days after the appellant or their agent received notice of the action of the Administrative Official.)

Please attach a copy of building permit application and site (plot) plan.

(Date)

(Appellant's Signature)

**(FOR OFFICIAL USE ONLY)
BOARD OF ADJUSTMENT - DECISION OF APPEAL**

In accordance with Article IV, Section 401A, the Board adopted the following motion concerning the Planning Director's interpretation of the Versailles-Midway-Woodford County Zoning Ordinance:

Hearing Date _____

Signed: _____
Chairman, Board of Adjustment

Planning Director

Date Filed

Date of Notice to Parties in Interest _____

Date of Notice to Newspaper _____

Date of Public Hearing _____ Fees Paid: _____