

**HIGHLAND BOARD OF ZONING APPEALS  
VARIANCE OR USE VARIANCE**

**PETITION FOR HEARING**

Applicant's Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Legal Owner of Property: \_\_\_\_\_ Phone# \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Please Check:  Variance       Use Variance

Location and address of proposed improvements: \_\_\_\_\_

\_\_\_\_\_

Brief description of proposed improvements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for denial or revocation of building permit: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Specific description of sections of the Highland Zoning Ordinance for which you are seeking a variance or use variance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

To the best of my knowledge and belief the above information is true and correct.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Legal Owner Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_

**•Application to be filed and fee paid no later than the 10 Days prior to the 4<sup>th</sup> Wednesday of the month.**

**\*\* The Board of Zoning Appeals meetings are on the 4<sup>th</sup> Wednesday of each month except for November and December meetings may be changed due to the holidays. Contact the Building & Inspection Dept. to confirm those dates.**

**\*\*\*The Petitioner shall bear the cost of all legal advertising and preparation of plans.**