



The City of  
**NORTH LITTLE ROCK**  
 OFFICE OF COMMUNITY PLANNING  
 120 Main St. • North Little Rock, AR 72114-2134  
 Phone (501) 975-8835 • Fax (501) 975-8837

## Application for an Board of Zoning Adjustment Appeal of Administrative Decision

The signer(s) of this application appeal to the Board of Zoning Adjustment of the City of North Little Rock, Arkansas as outlined in the Zoning

Ordinance of the City of North Little Rock that the determination of \_\_\_\_\_

made on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, is in error because of the following facts (attach separate sheets if necessary):

This appeal involves the following legally described property (an attached map may be used):

It is requested that a hearing be held on this matter, in which the applicant must appear in person to present to the Board sufficient evidence so the Board may reverse the decision of the Administrative Officer.

We, the undersigned, do attest to the truth and correctness of all facts and information presented with this application.

Applicants information:

Name of current property owner: \_\_\_\_\_

Applicant's name: \_\_\_\_\_ Status: Owner [  ] Agent [  ]

Mailing Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant's signature: \_\_\_\_\_

I, \_\_\_\_\_ the owner of the subject property, authorize \_\_\_\_\_

\_\_\_\_\_ to submit this application in this appeal before the Board of Zoning Adjustment.

Office Use Only:
Case No.
Date Filed
Received by

Office Use Only:
Date of Public Hearing: