Town of Hayesville

P.O. Box 235, Hayesville, NC 28904 Phone (828)389-1862 FAX (828)389-3708

Zoning Board of Adjustment Application

Application No	Receipt No	Date
	Fil	ing Fees
	's action: \$75.00 150.00, (each additional it ojects (2-4 units) \$150.00,	
Permit or Relief Requeste	ed: Appeal	Variance Special Use
Applicant		Owner
Address		Address
Phone		Phone
Email		Email
Legal relationship of appl	licant to property owner	
Purpose of permit		
Street Address of Propert	Ty	
•		Deed Book # Page #
Lot size	ac. Zoning Dis	trict
No. of buildings to remain	n No. of buildin	gs to be added
Sq. Ft. of : Retail Sto	re Office	Warehouse
Restaurant: Number of	Patron seats	Number of Parking Spaces
If needed to illustrate appear	or request for variance, at	each plot plan.
Signature of Applicant		
This application will be Sanderson Street 28904	heard on 1.	_, 20 at 6:00 pm at Hayesville Town Hall, 56

Return application with fee to: Town of Hayesville, 56 Sanderson Street or P.O. Box 235, Hayesville, NC 28904

Appearance by Applicant or authorized representative at meeting is required