

CITY OF FORT THOMAS

130 N. Ft. Thomas Avenue

Ft. Thomas, KY 41075

859-572-1210

BOARD OF ADJUSTMENT
APPEAL UNDER
THE OFFICIAL ZONING ORDINANCE

*I, or we the undersigned request a hearing before the Board of Adjustment for:
a dimensional variance _____, administrative interpretation _____, conditional use permit _____,
non-conforming use change _____. (Please check your request)*

PROPERTY ADDRESS: _____

APPLICANT: _____ **TELEPHONE NO:** _____

ADDRESS: _____

OWNER: _____ **TELEPHONE NO:** _____

ADDRESS: _____

LOT NO: _____ **SUBDIVISION** _____

PARCEL NO: _____ **ZONE:** _____

DESCRIPTION OF PROPOSED WORK OR USE:

*I (we) depose and say under the penalties of perjury that all of the statements, specifics, proposals
and/or plans contained in, or submitted with this application are true.*

Applicants Signature

Property Owner (Notarized Signature)

Subscribed and sworn to before me this _____ day of _____, 20_____, by

_____, *Owner.*

My Commission expires: _____

Notary Public

-----Office Use Only-----

CASE NO:

DATE FILED: _____

FEE: \$ _____