



Application for Action by the Norwalk Board of Adjustment

Type of Request (fees)			
<input type="checkbox"/>	Variance (\$90)	<input type="checkbox"/>	Other Action:
<input type="checkbox"/>	Special Use Permit (\$120)		
<input type="checkbox"/>	Appeal Ruling of Zoning Administrator (\$90)		
Date of Request:			
Applicant Information			
Name:			
Company:			
Current address:			
City:	State:	ZIP Code:	
Phone:	Email:		
Recorded Title Holder			
Title Holder Name:			
Current address:			
City:	State:	ZIP Code:	
Authorization to File			
Authorization to file an application for Board action is given to:			
for Board action on my/our property at:			
Title Holder Name:		Signature of Title Holder:	
Location of Property			
Address:			
City:	State:	ZIP Code:	
Legal Description:			

Description and Need

Describe the Request and the Need for Board Action:

Additional Comments

Provide any additional comments:

Applicant Signature

I hereby submit and consent to the application for Board of Adjustment Action in the City of Norwalk. I certify that I am familiar with applicable state and local codes and ordinances, the procedural requirements of the City of Norwalk, and have submitted all required information.

Signature of Applicant:

Date:

Name of Applicant:

Attachments to the Application (if required)

- | | |
|--------------------------|----------------|
| <input type="checkbox"/> | Site Plan |
| <input type="checkbox"/> | Specifications |
| <input type="checkbox"/> | Photograph(s) |