



**CITY OF ARCHDALE**  
307 BALFOUR DRIVE  
P.O. BOX 14068  
ARCHDALE, NORTH CAROLINA 27263  
PHONE: (336) 431-9141 FAX: (336) 431-2130

### APPLICATION FOR BOARD OF ADJUSTMENT REVIEW

**I the undersigned, through completion of this application, do respectfully request for a review of my request concerning the property described below:**

Property owner:

Address:

Telephone number:

Address of affected property (if different from address above):

Please indicate the requested action of the Board:

- Administrative Review       Vested Rights Review  
 Variance       Variance from Watershed District Requirements

Please describe the nature of the request:

Additional property information:

Parcel Number:  Deed Book:  Page:

Total area of property:

Current zoning of property:

Please attach to the application the following:

- All of the adjoining property owners to your affected property on a separate sheet of Paper (these are all property owners who have property that touches the affected property, including parcels directly across the street).
- A site plan from a registered engineer or surveyor of the affected property with the proper information shown.
- A filing fee of \$350.00.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature