

CITY OF SLIDELL

BOARD OF ZONING ADJUSTMENT

APPLICATION FOR AN APPEAL TO THE DECISION OF AN ADMINISTRATIVE OFFICIAL REGARDING AN ADMINISTRATIVE INTERPRETATION OF THE ZONING ORDINANCE

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OFFICE USE ONLY

BZA NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

RECEIPT NUMBER: \_\_\_\_\_ ZONING DISTRICT: \_\_\_\_\_

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I. APPLICANT

A. NAME: \_\_\_\_\_

B. MAILING ADDRESS: \_\_\_\_\_  
Street / Box # City State Zip

C. PHONE NUMBER: \_\_\_\_\_

D. \_\_\_\_\_  
Applicant's Signature Date

II. IF THE APPLICANT IS APPEALING AN ADMINISTRATIVE DENIAL OF A PERMIT, INCLUDE THE FOLLOWING:

A. Ownership of the property for which the permit was denied:

1. Name: \_\_\_\_\_

2. Mailing address: \_\_\_\_\_  
Street / Box # City State Zip

3. Phone Number: \_\_\_\_\_

4. \_\_\_\_\_  
Owner's Signature Date

B. Provide a copy of property owner's deed and attach as Exhibit II-B.

C. Street address or general location of property if there is no assigned street address:

III. IF THE APPLICANT IS APPEALING A DECISION THAT WOULD OVERTURN AN ADMINISTRATOR'S APPROVAL, INCLUDE THE LEGAL DESCRIPTION OF THE PROPERTY TO WHICH THE APPEAL IS ADDRESSED AS EXHIBIT III.

IV. REVIEW INFORMATION

A. Identify the applicable Zoning Ordinance Section to which the appeal is addressed:

\_\_\_\_\_  
\_\_\_\_\_

B. Identify the specific part of the applicable Section:

\_\_\_\_\_  
\_\_\_\_\_

C. Include a narrative and attach as Exhibit IV-C. The narrative should provide the applicant's alternate interpretation of the specific Section being appealed.

D. Provide any documentation necessary for the board to evaluate the applicant's appeal and attach as Exhibit IV-D. Such documentation should include studies, reports, or information from other ordinances which support the applicant's interpretation.

V. COMPLETENESS: The Planning Department will only accept this application when all the information herein requested is provided.

VI. FEE: A fee of \$10 is required. Checks should be made to the City of Slidell. **PLUS LEGAL ADVERTISEMENT FEES.**