



CITY OF BESSEMER CITY
ZONING BOARD OF ADJUSTMENT
GENERAL APPLICATION FORM

CASE #: _____ DATE: _____ FEE: _____ RECEIPT #: _____

TYPE OF REQUEST:

APPEAL ____ VARIANCE ____ SPECIAL EXCEPTION ____ NON-CONFORMING ____ OTHER ____

APPLICANT _____ OWNER _____

ADDRESS _____ ADDRESS _____

CITY/ST/ZIP _____ CITY/ST/ZIP _____

TELEPHONE _____ TELEPHONE _____

LEGAL RELATIONSHIP OF APPLICANT TO PROPERTY OWNER _____

PURPOSE OF REQUEST _____

PROPERTY ADDRESS: _____

PARCEL ID: _____ TAX ID: _____

LOT SIZE: _____ ZONING: _____

*AN ACCURATE PLAT MUST BE ATTACHED SHOWING ALL EXISTING AND PROPOSED
STRUCTURES, PROPERTY LINES, SETBACKS, PARKING FACILITIES AND ANY OTHER
RELEVANT INFORMATION.*

SIGNATURE OF APPLICANT

TITLE (if organization)