

City of Decatur - Board of Zoning Appeals  
225 West Monroe St  
Decatur IN 46733

tx 260.724.3814  
fax 260.724.9104

BZA \_\_\_\_\_  
date \_\_\_\_\_

Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

Owner \_\_\_\_\_ Phone \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

Premises Affected (ATTACH LEGAL DESCRIPTION) \_\_\_\_\_

Nature and Size of Improvements Now Existing on Premises \_\_\_\_\_

Present Zoning Classification \_\_\_\_\_

Date present owner acquired legal title to the premises \_\_\_\_\_

- (1) **DESCRIBE REQUEST IN DETAIL; ATTACH A FULL STATEMENT OF REASONS THE REQUEST IS BEING APPLIED FOR.**
- (2) **ATTACH A PLOT PLAN/SURVEY SHOWING THE LOCATION OF ALL EXISTING, PROPOSED STRUCTURES, USES ON THE LOT, WITH DIMENSIONS, INCLUDING DISTANCES FROM STRUCTURES TO ALL PROPERTY LINES.**
- (3) **FILING FEE \$50. YOU MUST BE PRESENT AT THE MEETING.**
- (4) THIS APPLICATION, TO THE BEST OF MY KNOWLEDGE AND BELIEF, IS TRUE AND CORRECT.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**ALL PAPER WORK MUST BE SUBMITTED BY THE APPLICATION DEADLINE  
NO PAPERS WILL BE ACCEPTED THE NIGHT OF THE MEETING!**

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*Following to be completed by building department:*

Section number of the Decatur City Code of 1978 of which the appeal is being requested:

Variance (from Physical Requirements) \_\_\_\_\_

Special Exception (of Use Restrictions) \_\_\_\_\_

Date of Public Hearing \_\_\_\_\_

bza5