



# Manitowoc County Planning and Zoning Department APPEAL APPLICATION

Petition #	ZPA-	- 20
Fee	\$570.00	
Receipt #		

Ordinance (s) affected:	Section (s):
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OWNER / APPLICANT	
Owner Name (print)	Applicant/Agent Name (if different)
Address (1)	Address (1)
Address (2)	Address (2)
City/State/Zip	City/State/Zip
Phone	Phone

PROPERTY LOCATION LEGAL DESCRIPTION	
_____ 1/4, _____ 1/4, S _____ T _____ N _____ R _____ E Town of _____	
House or Fire # _____	Tax Number _____

(I) (We) _____ do hereby appeal to the Manitowoc County Board of Adjustment for:
_____ An interpretation of the ordinance (Map) (Text).
_____ A decision of an alleged error, order, requirement etc.
_____ Other (explain): _____

<p><b>WE UNDERSIGNED HEREBY APPEAL TO THE MANITOWOC COUNTY BOARD OF ADJUSTMENT FOR THE FOLLOWING REASONS:</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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<p>Return to: Manitowoc County Planning and Zoning Department 4319 Expo Drive, PO Box 935 Manitowoc, WI 54221-0935 (920) 683-4185</p>	<p>I have been informed and have willingly agreed to pay for the required public hearing notice and allow the Manitowoc County Board of Adjustment and Manitowoc County Planning and Park Staff access to the property for the matter of gathering and assessing information pertaining to this appeal.</p>
Signature (applicant, owner, agent)	Date