Office use only
Case #

NOTICE OF APPLICATION TO THE BOARD OF ADJUSTMENT ONE FORM PER VARIANCE REQUEST \$185.00 Non-Refundable Application Fee

Submit forms to:

Board of Adjustment, Attn: Secretary	, Board of Adjustment, 801	E Walnut St, Rm 315,	Columbia, MO 65	201
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Board of Adjustment, Attn: Secreta	ry, Board C	of Adjustment, 801 E. Walnut St, Rm 315, Columbia, MO 65201		
Missouri:	-	he following described property located in Boone County,		
*Tax Parcel Number	•	*legal description (attach separate form if necessary)		
and known, or to be known as				
* str	eet or route	*City, Zip Code		
*Notice is hereby given that I/we th Missouri for a variance from \square Zon	e property ing Sul	owner apply to the Board of Adjustment, Boone County, bdivision Regulations Section(s) (use separate form for each requested variance)		
*Reason for request (attach a sepa	rate sheet	if needed):		
Type and location of building the va aerial photograph – attach copy)	ariance is r	equested for, if applicable. (May be indicated on survey or		
*Current zoning:	*Current (*Current use of the property:		
Proposed use if different from above	/e:			
Regulations. If the Board of Adjustm with the Zoning Regulations, the spir secured and substantial justice will b request and that a Certificate of Decil understand that only the variance an additional variance is required notice has been given to intereste	eent grants pit of the Zore done. I/Wision be issue requester it will not be done and parties as	d above will be heard by the Board. I also understand that if be heard before the Board until the variance is advertised and s required.		
		rith the names and addresses of all parties in interest, including all property, to the best of my/our belief, and a copy of the current		
		erstand I will be billed for additional fees including mailing, public ion is true and correct to the best of my knowledge.		
*Signature of owner(s)	Date	*Print Name		
*Daytime Phone		*Address		
Email Address		*City & Zip		
Bill additional fees to (if applicab	ole):			
Name Phone				
		I hereby acknowledge receipt of application:		
Address				
		Secretary, Board of Adjustment Date		
Email Address				

^{****}Incomplete forms will be rejected as an incomplete submission****