



Notice of Appeal to Board of Adjustment Application

Date: _____

Date of Notification of Decision for which there is an Appeal: _____

NOTICE: This Notice of Appeal must be filed within 30 day of the issuance of the Planning Director, or designated Administrator’s Order, decision, determination or interpretation. Failure to file, in a timely manner, a complete Notice of Appeal (application, fee, all attachments, etc.) shall constitute a waiver of any rights to appeal under the Town of Huntersville Zoning Ordinance, Article 11.2, *et seq.* Appellant hereby grants permission to the Town of Huntersville personnel to enter the subject property for any purpose required in processing this Notice of Appeal. Town of Huntersville personnel also agree to coordinate such site visits with property owner at times agreeable to all parties.

Location of Building / Property

Address: _____

Tax Parcel ID Number(s): _____

Acreage: _____ Zoning: _____

Text of Zoning Ordinance to be appealed

Article: _____ Section: _____

Text to be appealed: _____

Submittal Requirements

The following must be submitted with this completed application (signed and dated by the Appellant):

- One (1) hard copy and one (1) electronic copy of any applicable map(s), site plans, exhibits, and applications showing exact location of property with respect to existing streets, adjoining lots and other important features on or contiguous to the property. Also, include any maps and/or illustrations (to scale), which are necessary to show the location, number and size of buildings, signs, etc., on the property.
- A list of names, addresses and tax parcel identification numbers of properties that abut the site, are across the street from the site or are otherwise within one hundred feet (100’) of the site. (Digital format is preferred)
- Review Fee (Please check most recent version of Fee Schedule for applicable review fee for Appeal)

Notifications Required

Planning Staff will be required to notify in writing each adjoining property owner. At least, one (1) sign will be placed on the property(ies) in question located along public streets, or where visible by the public.

APPEALS WITHIN WATERSHED OVERLAY DISTRICTS

If you are appealing a determination from the Mountain Island Lake or Lake Norman Watershed Overlay Districts, Planning Staff will be required to notify in writing each local government having jurisdiction in the watershed and the entity using the water supply for consumption as follows:

- Mountain Island Lake Watershed Overlay. Local governments having jurisdiction in the watershed: Charlotte Mecklenburg, Cornelius and Huntersville. Entities using the water supply for consumption: Mecklenburg County, Gastonia and Mount Holly.
- Lake Norman Watershed Overlay. Local governments having jurisdiction in the watershed: Davidson, Cornelius and Huntersville. Entities using the water supply for consumption: Mooresville, Mecklenburg County and Lincoln County.

Appeal Requirements

STANDARDS FOR GRANDING AN APPEAL (Article 11.3.2.c):

1. The Board of Adjustment shall reserve or modify the order, decision, determination, or interpretation under appeal only upon finding an error in the application of these regulations on the part of the officer rendering the order, decision, determination, or interpretation.
2. In modifying the order, decision, determination, or interpretation, the Board of Adjustment shall have all the powers of the officer from whom the appeal is taken.

In the following space, indicate the FACTS or evidence that demonstrates to the Board of Adjustment that should lead the Board to conclude the decision of the Planning Director or designated Administrator was in error.

Applicant

Printed Name _____ Phone _____

Corporation Limited Liability Company Trust Partnership Other: _____

By signature below, I hereby acknowledge, as/on behalf of (circle one) the applicant my understanding this application will be considered in a quasi-judicial proceeding and that neither I, nor anyone on my behalf, may contact the Board of Commissioners except through sworn testimony at the public hearing. (Applicable if box is checked.)

Signature _____

Title _____ Email _____

Address of Applicant _____

Property Owner (if different than applicant)

Printed Name _____ Phone _____

Corporation Limited Liability Company Trust Partnership Other: _____

By signature below, I hereby acknowledge, as/on behalf of (circle one) the owner my understanding this application will be considered in a quasi-judicial proceeding and that neither I, nor anyone on my behalf, may contact the Board of Commissioners except through sworn testimony at the public hearing. (Applicable if box is checked.)

Signature _____

Title _____ Email _____

Address of Property Owner _____

* Property owner hereby grants permission to the Town of Huntersville personnel to enter the subject property for any purpose required in processing this application.

Every owner of each parcel included in this application, or the owner (s) duly authorized agent, must sign this application. If signed by an agent on behalf of the Owner, this petition MUST be accompanied by a Limited Power of Attorney signed by the property owner (s) and notarized, specifically authorizing the agent to act on the owner (s) behalf in signing this application. Failure of each owner, or their duly authorized agent, to sign, or failure to include the authority of the agent signed by the property owner, will result in an INVALID APPLICATION. **If additional space is needed for signatures, attach the Town of Huntersville Signature Addendum Form.**