



APPLICATION FOR APPEAL TO THE BOARD OF ADJUSTMENT

(INCLUDE ANY NECESSARY SUPPORTING MATERIAL)

ADDRESS OF PROPERTY:		FEE: \$500.00	
LEGAL DESCRIPTION (SUBDIVISION, SECTION, LOT NUMBER):			
PROPERTY OWNER FIRM:	CONTACT NAME:	TELEPHONE:	E-MAIL
MAILING ADDRESS:		CITY:	STATE ZIP CODE
APPLICANT FIRM:	CONTACT NAME:	TELEPHONE:	E-MAIL
MAILING ADDRESS:		CITY:	STATE ZIP CODE
WHOSE DECISION ARE YOU APPEALING:		DATE OF THAT DECISION:	
WHAT ARE YOU APPEALING:		WHY ARE YOU APPEALING:	
PROJECT FOR WHICH APPEAL IS FILED:			

THIS APPLICATION IS INCOMPLETE WITHOUT A LETTER OF EXPLANATION AND ASSOCIATED DOCUMENTS AS REQUIRED BY THE RULES AND REGULATIONS OF THE BOARD OF ADJUSTMENT.

(FOR CITY USE ONLY)

SUBMITTAL VERIFICATION/INSPECTION AUTHORIZATION: I, as owner of the property hereinafter referenced, do hereby execute this document, and acknowledge the above statements to be true and accurate to the best of knowledge. I have received, read and understand the terms and conditions of this request, and agree to compliance with all applicable codes and ordinances of the City.	
OPTIONAL _____ I authorize my duly authorized agent to coordinate with the City and its representatives and speak on my behalf for the purposes of representing me in regards to this request.	
_____ APPLICANT SIGNATURE	
_____ PRINTED NAME	_____ DATE

PERMIT NUMBER:
AMOUNT RECEIVED:
NOTES:



Building & Development Services
1102 Lohmans Crossing, Lakeway, TX 78734
Phone: (512) 314-7540 Fax: (512) 314-7541
www.lakeway-tx.gov

(ADDITIONAL SPACE AS NEEDED FOR AUTHORIZED AGENTS OF THE OWNER)

ADDRESS OF PROPERTY:

PRINTED NAME OF GENERAL CONTRACTOR, SUBCONTRACTOR, OR OTHER AUTHORIZED AGENTS OF OWNER

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