

APPEAL TO THE BATH ZONING BOARD

SIGN CODE ADMINISTRATIVE APPEAL

NUMBER _____

Property Address _____

Property owner's name _____

Property owner's address _____

Applicant's name _____

applicant's address _____

(if different than owner) _____

Interest in property _____

(owner, prospective buyer _____

lessee, etc.) _____

Current use of property _____

Issue being appealed _____

Submit with this application the following

1. Eight (8) copies of any sketches, diagram, pictures, etc detailing the proposed sign(s). These must be neat and accurate
2. Cover letter to the Bath Zoning Board explaining the nature of your appeal. Specify the code section(s) involved.
3. \$75.00 application fee.

The Zoning board meets the first and third Monday of the month (check with the Codes Office for dates of meetings in months that have a Monday holiday in them).

We must have all the needed materials in the Codes office at least 3 weeks prior to the date of the meeting you wish to be scheduled. INCOMPLETE APPLICATIONS WILL NOT BE SCHEDULED.

In the event that an agenda is full when your materials are received, your project will be scheduled for the next meeting with available space on the agendas.

Someone must be present at the meeting to represent the project and answer questions the Board may have. If you have any questions, contact the Codes Office at 443-8334.

The undersigned certifies that all information and materials submitted are true and accurate to the best of their knowledge, that they lawfully represent the owner or the property, and that they understand that falsification or misrepresentation of any aspect of the project may cause the review process to be terminated or nullify any approvals granted.

Applicant's name
(type or print)

Applicant's signature

Telephone number

Date
