

Appeal Application

**Lincoln County Planning and Inspections Department
302 N. Academy St., Suite A, Lincolnton, NC 28092
Phone: (704)736-8440 Fax: (704)732-9010**



Part I

Applicant Name _____

Applicant Address _____

Applicant Phone Number _____

Property Owner's Name _____

Property Owner's Address _____

Property Owner's Phone Number _____

Part II

Property Location _____

Property ID # (10 digits) _____ Property Size _____

Parcel # (5 digits) _____ Deed Book(s) _____ Page(s) _____

Part III

Date of Zoning Administrator's decision:

Summary of Zoning Administrator's decision:

Briefly describe your reasons for seeking an appeal of decision:

\$500 APPLICATION FEE MUST BE RECEIVED BEFORE PROCESSING AN APPEAL REQUEST

I hereby certify that all of the information provided for this application and attachments is true and correct to the best of my knowledge.

Applicant

Date

Owner

Date