

TOWN OF SHARPSBURG
BOARD OF ZONING APPEALS
106 East Main Street
P.O Box 368
Sharpsburg, Maryland 21782
301-432-4428
Fax: 301-432-8990



For Office Use

Docket No.: _____
Map: _____, Block: _____, Parcel: _____
Zoning District: _____
Date of Filing: _____
Date of Hearing: _____

Appeal Charging Error In Administrative Ruling or Action

Property Location _____

Appellant's present legal interest in above property: (Check One)

____ Owner (Including Joint Ownership) ____ Lessee ____ Contract to rent/lease

____ Contract to Purchase ____ Other _____

Official or agency from whose ruling or action this appeal is made:

Date of ruling or action:

On attached sheet(s) please provide:

- Brief description of ruling or action from which this appeal is made. (Attach copy of ruling or document indicating such action.)
- Brief description, in Appellant's view, of what the ruling or action should have been
- Article/section of the Zoning Ordinance which Appellant contends was misinterpreted
- Error in fact, if any, involved in the ruling or action from which this appeal is made
- Error of law, if any, involved in the ruling or action from which this appeal is made
- Questions of fact, if any, presented to the Board in this appeal
- Statement of Appellant's interest in the matter (i.e., manner in which you are aggrieved by the ruling or action complained of, as property owner or otherwise)

I hereby certify that I have, to the best of my knowledge, accurately supplied the information required for the above referenced appeal.

Signature of Appellant

Address of Appellant

Phone Number of Appellant

This form is to be used to assist the customer in gathering the information necessary to submit an Appeal. However, the Appeal shall be processed in person.