



**TOWN OF ABERDEEN
CERTIFICATE OF ZONING COMPLIANCE**

**115 N. Poplar Street
Planning / Zoning / Inspections
910-944-7024 910-944-3672 (fax)**

Board of Adjustment

Application No. _____

Date: _____

APPEAL FROM AN ACTION OF THE ZONING ENFORCEMENT OFFICER and/or PETITION FOR AN INTERPRETATION OF THE ZONING ORDINANCE

To The Town of Aberdeen Board of Adjustment

I _____, hereby appeal to the Board of Adjustment from the following adverse decision of a Zoning Enforcement Officer of the Planning Department:

_____ This adverse decision was made with respect to property described as attached.

I _____, hereby request an interpretation of

- () the Zoning Map
- () the following section(s) of the text of the Ordinance;

_____ insofar as the map and/or the ordinance relate to the use of the property described as attached.

STATEMENT BY APPELLANT: (In the space provided below, or on the back of this form, present your interpretation of the ordinance provisions in question and state what reasons you have for believing that your interpretation is the correct one.) _____

I certify that all the information presented by me in this application is accurate to the best of my knowledge, information, and belief.

Signature of applicant

Date