



P.O. BOX 180 OWASSO, OKLAHOMA 74055 (918) 376-1500 FAX (918) 376-1597

OBOA # _____

**BOARD OF ADJUSTMENT
SPECIAL EXCEPTION, INTERPRETATION OR APPEAL**

THE FOLLOWING INFORMATION TO BE SUPPLIED BY APPLICANT

ACTION REQUESTED

Special Exception _____ **Interpretation of Zoning Text** _____
Appeal from Building Inspector _____ **Interpretation of Zoning Map** _____

Describe below the specifics of your request. Where applicable, indicate pertinent uses, distances, dimensions, etc. Please attach any plot plans, photographs and other factual information that will assist the Board in determining the merits of your request.

PROPERTY LEGAL DESCRIPTION:

Name and address of Record Owner	Address or General Location of Property
As applicant, what is your interest in this property? <input type="checkbox"/> Present Owner <input type="checkbox"/> Agent for Owner <input type="checkbox"/> Purchaser <input type="checkbox"/> Other <input type="checkbox"/> Attorney for Owner	Name of Person to be billed for publication: _____ Mailing Address: _____ _____ Phone Number _____

I DO HEREBY CERTIFY THAT THE INFORMATION HEREIN SUBMITTED IS COMPLETE, TRUE & ACCURATE	SIGNATURE	DATE
---	------------------	-------------

Please submit the completed application form and application fee (**\$100.00 + \$2.00 per notice mailed**), along with A Certified 300' radius Report (available from an abstract company) to the Owasso City Planner on or before the first day of the month in which the request is to be heard by the Board. **This is a quasi-judicial proceeding. The applicant or applicant's agent must be present at the hearing to receive approval.**