



**Planning & Zoning Department**

**FORM BASED CODE  
APPLICATION  
ARCHITECTURAL AND LANDSCAPE APPEAL**

**SECTION A. PROPERTY INFORMATION**

**Petitioner's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone No. (Home):** \_\_\_\_\_ **(Work):** \_\_\_\_\_ **(Cell):** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone No. (Home):** \_\_\_\_\_ **(Work):** \_\_\_\_\_ **(Cell):** \_\_\_\_\_

**SECTION B. PROJECT INFORMATION**

**Existing Use:** \_\_\_\_\_ **Proposed Use** \_\_\_\_\_

**Reason for Appeal:** \_\_\_\_\_  
(SECTIONS OF FBC FOR WHICH APPEAL IS BEING REQUESTED)

**Property Description:** \_\_\_\_\_  
Lot Block Subdivision

**Property Address:** \_\_\_\_\_ **Property Zoning** \_\_\_\_\_

**As petitioner or owner of the above described property, I, (we) hereby request a hearing on the Architectural and Landscape Appeal being requested before the Architectural Design Review Board and City Council.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner/Agent's Name (Please Print):** \_\_\_\_\_

**\$150 Application Fee:** \_\_\_\_\_ **Application Received by:** \_\_\_\_\_  
Receipt No.

**Application deadline:** \_\_\_\_\_ **ADRB Hearing date:** \_\_\_\_\_ **\*CC Hearing date:** \_\_\_\_\_  
\* Board's decision is final unless appealed within 30 days to City Council

- Submit survey of property
- Reduced copy of site plan (11 x17) & electronic copy
- Architectural and Landscape Plans (11 x 17) & electronic copy