



Application To The City Of Travelers Rest Building And Housing Board Of Appeals

Docket Number

Date / Time / Location of Hearing: _____

Application Fee \$75

Mailing Address

Telephone Number _____

Property Location _____

Permit/Case/Plan Number _____ Inspector _____

Date of Notice of Violations _____

In accordance with the provisions of the code of ordinance 5.04.070, adopted by the City of Travelers Rest, I hereby appeal to the building and housing board of appeals for:

Interpretation, including modification or variance and the reasons therefore:

Hardship or conditions upon which appeal is made:

Signature _____ Date _____