



Town of Georgetown Board of Adjustment Application

This application will be considered complete once eight (8) copies of the application and site plan (drawn to scale) have been received with the required fee. *Town Code §98-3.(6)(a)* Please forward one PDF copy of Site Plan to jcraddock@georgetowndel.com

The purpose of this application is to request:

Check Type of Request:	
Variance	Chapter 230, Section below:
Area	
Front Yard	
Side Yard	
Rear Yard	
Height	
Other	
Special Exception	Chapter 230, Section below:
Parking	
Yard	
Other	
Interpretation of	Chapter 230, Section below:
An appeal to decision according to Chapter 230, Section below:	

Property Information	
Sussex County Tax Map/Parcel:	
Street Address/Location:	
Zoning District:	
Current Property Use:	
Proposed Property Use:	

Property Owner Information	
Owner Name:	
Mailing Address:	
City, State, Zip:	
Phone Number:	
Fax Number:	
Email Address:	

Applicant Information	
Applicant Name:	
Mailing Address:	
City, State, Zip:	
Phone Number:	
Fax Number:	
Email Address:	

I/We believe the Board of Adjustment should approve this request because:
(Please state hardship. Economic hardship alone is not a valid reason for granting a variance. If an interpretation is requested, state grounds for interpretation.)

I hereby certify that all of the statements in this application and attached plans are true to the best of my knowledge.

Signatures	
Property Owner:	
Applicant:	

OFFICE USE ONLY:	
CASE #: _____	DATE APPLICATION RECEIVED: _____
FEE RECEIVED: \$ _____ CASH/CHECK # _____	RECEIVED BY: _____
DATE OF HEARING: _____	DATE HEARING ADVERTISED: _____