



Building & Zoning Dept.
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ZONING BOARD OF APPEALS
CITY HALL
PLATTSBURGH, NY 12901

ADMINISTRATIVE REVIEW

Date: _____

Appeal No. #: _____

An application is hereby made to the Zoning Board of Appeals pursuant to the City of Plattsburgh Zoning Ordinance for Administrative Review of the herein described decision of the Building Inspector.

Applicant: _____

Applicant's Address: _____

Decision of Building Inspector:

Regarding Property Located At: _____

Owned By: _____

Zoning District: _____

Determination Appealed: _____

Has a Previous Appeal been filed with respect this Property Request? Yes No

If Yes: Date: _____

Appeal No. #: _____

The Facts upon which this Appeal is made are as follows:

State of New York
County of Clinton

I do solemnly, sincerely, and truly, declare and affirm that all the above statements are true and correct.

Sworn to before me this _____ day of _____, 20____

Signature of Applicant

Notary Public