

**VILLAGE OF SOUTH AMHERST**

Zoning Board of Appeals Meeting Request

Email: [recordsclerk@southamherst.org](mailto:recordsclerk@southamherst.org)

Phone: (440)986-2222 ext. 5

Form submitted on: \_\_\_\_\_

Parcel(s)#: \_\_\_\_\_

Applicant Information

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Property Owner (if other than applicant)

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Reason for meeting request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Office Use:

\$75.00 fee received by: \_\_\_\_\_ on: \_\_\_\_\_