

**APPLICATION TO APPEAR BEFORE  
THE COVINGTON BOARD OF ZONING APPEALS**

**Location of Property:**

Street Address: \_\_\_\_\_ Zoning: \_\_\_\_\_  
Map# \_\_\_\_\_ Parcel # \_\_\_\_\_  
Map of the Property (Please attach a scaled drawing)

**Applicant:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Alternate Phone# \_\_\_\_\_

**Reason for Application:**

- \_\_\_\_\_ Administrative Review (No Charge)
- \_\_\_\_\_ Special Exceptions (\$100.00 application fee)
  - \_\_\_\_\_ a. Lot of Record
  - \_\_\_\_\_ b. Front Yards
  - \_\_\_\_\_ c. Non-conforming Uses
  - \_\_\_\_\_ d. Uses Permitted on Appeal
- \_\_\_\_\_ Variance (\$100.00 Application Fee)

**Explanation:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I HEREBY CERTIFY THAT THE STATEMENTS ON THIS APPLICATION AND ANY MAPS, DRAWINGS OR OTHER ACCOMPANYING DATA SUBMITTED WITH THIS APPLICATION ARE TRUE AND CORRECT. ANY MISREPRESENTATION OF INFORMATION SHALL BE GROUNDS FOR REVOCATION OF ANY DECISION OF THE COVINGTON BOARD OF ZONING APPEALS.**

**SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_**  
**\*SOMEONE MUST BE PRESENT AT MEETING TO REPRESENT APPLICATION\***



Date of Meeting: \_\_\_\_\_ Time: \_\_\_\_\_

Meeting Location: Covington City Hall, 200 W. Washington Ave. Covington, TN

Application Fee: \$ \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Credit Card \_\_\_\_\_  
Date Paid \_\_\_\_\_ Accepted By \_\_\_\_\_

White – File copy

Yellow- Applicant copy

Pink- Accounting Copy