

**CITY OF GOOD HOPE  
Board of Adjustments**

**REQUEST FOR RULING / VARIANCE / USE UPON APPEAL  
\$100.00 Fee Required**

Property Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Site/Lot Size: \_\_\_\_\_

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

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

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

**NOTICE OF REQUEST FOR PUBLIC HEARING**

To: The Board of Adjustments of the City of Good Hope

I hereby request a hearing for a ruling concerning the property address listed above for the described reasons herewith,

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\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

The entire Zoning Ordinance is on our website at [www.goodhopeal.com](http://www.goodhopeal.com). Feel free to call City Hall if you have any questions at (256)739-3757, email: [clerk@goodhopeal.com](mailto:clerk@goodhopeal.com), [mayor@goodhopeal.com](mailto:mayor@goodhopeal.com) or by fax (256)739-5340.