THE TOWN OF
HIGHLAND BEACH, MARYLAND-est. 1893

Fee Received _____
Date Received _____

APPLICATION TO THE BOARD OF APPEALS

Type of application:

Check all that apply-

- Variance
- Special Exception
- Appeal
- Interpretation

Date of Decision:
Permit Number: HB

Attach fee of $350.00 and a copy of the decision being appealed (if applicable)

Appellant Information (Appealing Party)

Name _____
Address _____
_____
Phone # _____
Attorney's Name (if applicable) _____
Attorney's Address _____
_____
Attorney's Phone # _____

Applicant Information (Original party applying for approval)

Name _____
Address _____
_____
Phone # _____

Reason for Appeal

Provide a brief statement as to reasons for this appeal below: (you may attach more paper if necessary)

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