APPLICATION FOR PUBLIC HEARING
VILLAGE OF LOCKLAND

Hearing requested: Housing Board of Appeals

Applicant Information:
Name
Address
Home Telephone__ Business Telephone__

Address of property in question (if not the same) ________________________________

The following questions must be answered in full. All requested information must be provided before hearing will be scheduled.

1. Are you the owner of subject property: Yes ( ) No ( )
   If no: Owner’s name: __________________________________________
   Owner’s Address: __________________________________________

2. Describe in detail your request (Use reverse side of this form if more space is needed):
   _______________________________________________________
   _______________________________________________________
   _______________________________________________________

3. Provide a list of all adjacent property owners (Attach extra sheet if necessary):
   Name
   Address
   _______________________________________________________
   _______________________________________________________
   _______________________________________________________

4. Attach, a drawing of property, indicating shape and dimensions of lot and structures, both existing and proposed. (If applicable)

5. Explain any hardship that will be imposed on you if your request is not granted.
   _______________________________________________________
   _______________________________________________________
   _______________________________________________________

6. Have you ever presented this or a similar request to the Housing Board of Appeals?
   Yes ( ) No ( ) If yes, When? ________________________________

Signature of applicant ____________________________ Date _________________
Signature of owner ____________________________ Date _________________