



Application #: \_\_\_\_\_  
 Date Submitted: \_\_\_\_\_  
 Public Hearing: \_\_\_\_\_  
 Date Approved: \_\_\_\_\_

CITY OF PARKVILLE • 8880 Clark Avenue • Parkville, MO 64152 • (816) 741-7676 • FAX (816) 741-0013

**Application for Appeal of Administrative Decision**

**1. Applicant / Contact Information**

**Applicant(s)**

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

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

City, State: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

We, the undersigned, do hereby authorize the submittal of this application and associated documents and certify that all information contained therein is true and correct. We acknowledge that development in the City of Parkville is subject to the Municipal Code of the City of Parkville. We do hereby agree to abide by and comply with the above-mentioned codes, and further understand that any violations from the provisions of such or from the conditions as stated herein shall constitute cause for fines, punishments and revocation of approvals as applicable.

**Applicant's Signature** (Required) \_\_\_\_\_ Date: \_\_\_\_\_

**2. General Information**

Application # of the case in question: \_\_\_\_\_

Applicable section(s) of the Development Code in question: \_\_\_\_\_

**3. Property Information**

Property address / general location: \_\_\_\_\_

Parcel ID Number(s): \_\_\_\_\_ Zoning district: \_\_\_\_\_

Present use of the property: \_\_\_\_\_

**4. Appeal Request**

The appeal of administrative decisions is a process to determine if there was an error in any final decision in the interpretation, administration or enforcement of the Development Code by an administrative official of the City. Please describe the nature of the request:

Other comments or factors relating to this request:

**5. Checklist of Required Submittals**

- Completed application, including all required details and supporting data.
- Nonrefundable application fee of \$300.00. Separately, the applicant will be billed to recover costs for required publication, posted and mailed notice per Parkville Municipal Code, Title IV, Section 403.010, Subsection E.
- Applicant's signature.

**For City Use Only**

Application accepted as complete by: \_\_\_\_\_  
Name/Title \_\_\_\_\_ Date \_\_\_\_\_

Application fee payment: Check # \_\_\_\_\_ M.O. \_\_\_\_\_ Cash

Hearing notice published in: \_\_\_\_\_ Date of publication: \_\_\_\_\_

Final reimbursable costs paid (if applicable). Date of Action: \_\_\_\_\_

**Board of Zoning Adjustment Action:**  Approved  Approved with Conditions  Denied

Date of Action: \_\_\_\_\_

Conditions if any: \_\_\_\_\_  
\_\_\_\_\_