



NOTICE OF APPEAL AND APPLICATION FOR REVIEW

Address of Property: _____

Petitioner Info

Petitioner Name: _____

(petitioner must have interest in land)

Mailing Address: _____

City / State: _____
Zip Code _____
Phone: _____
Email or Fax: _____

Contact Info

Primary Contact _____

Relationship to petitioner _____
(e.g. Architect, Attorney, Contractor)

Mailing Address: _____

City / State: _____
Zip Code _____
Phone: _____
Email or Fax: _____

Property Information:

Present Use of Property: _____

Proposed Use of Property: _____

Investment in Property*: _____

*Please provide the estimated dollar amount necessary to complete the proposed project or implement the proposed use.

Do you: Own the property?
 Lease the property? Term of the lease: _____
 Have an offer to purchase the property?
 Have another type of interest in the property _____

Petitioner's Signature: _____ **Date:** _____

Validation for \$_____ fee must appear here

Type 0209

Staff Use Only:

| | |
|---|----------------------|
| Previous BOZA history at this site: _____ | Lot Area: _____ |
| Previous case no. _____ | Zoning: _____ |
| Hearing date _____ | Qtr Section: _____ |
| Property use changing? _____ | Ald. District: _____ |
| Is this a new operator? | |

Please make checks payable to :
"City of Milwaukee"
Note: Depending upon your application, additional fees may be required prior to your hearing. For a complete list of fees, please refer to s.200-33-65 MCO. This application will not be accepted for review unless the validation block indicates that the FEE has been paid. ALL FEES ARE NON-REFUNDABLE.