

<b>APPEAL VIOLATION APPLICATION</b>	<b>TELEPHONE</b>
	Fax: 252-358-0198      252-358-7801



**HERTFORD COUNTY**  
**Planning & Zoning Department**

**115 Justice Drive, Suite 2**  
**P. O. Box 429**  
**Winton, NC 27986**

Date \_\_\_\_\_

Hertford County  
Zoning Board of Adjustment  
P. O. Box 429  
Winton, NC 27986

Dear Board:

I, \_\_\_\_\_, wish to appeal a notice of Violation issued on \_\_\_\_\_ date by \_\_\_\_\_.

The Violation noted is for \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

I disagree with this notice because \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

I am enclosing the required \$75.00 Application Fee. (Please make checks payable to Hertford County Planning Department)

Sincerely,

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

Address:

Phone:

Enclosure

Date Received _____	Office Use Only
Application Fee _____	Cash/Check/MO. _____ Receipt # _____