



## Town of Lakewood

3110 Strand Road  
Duluth, MN 55803

### PLANNING & ZONING DEPARTMENT APPEAL FORM

Appeals from Zoning Administrator, Planning & Zoning, or Board of Adjustment Decisions

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Location (if different from above address): \_\_\_\_\_

**TYPE OF APPEAL:** Application is hereby made for an appeal to the:

- \_\_\_\_\_ A decision made by the Zoning Administrator. Under Lakewood Ordinance Article VIII, Sec. 1.04, this appeal will be heard by the **Lakewood Board of Adjustment.**
- \_\_\_\_\_ A decision made by the Board of Adjustment. Under Lakewood Ordinance Article VIII, Sec. 6.03, this appeal will be heard by the **Lakewood Board of Supervisors.**
- \_\_\_\_\_ A decision made by the Planning and Zoning Commission. Under Lakewood Ordinance Article VIII, Sec. 4, this appeal will be heard by the **Lakewood Board of Supervisor.**

#### REASONS FOR APPEAL:

1. An irregularity in the proceedings that resulted in an unfair hearing or decision.
2. Perceived misconduct by a member of the decision-making body or Zoning Administrator.
3. Material evidence, newly discovered, unavailable at the hearing, that would have likely resulted in a different decision.
4. Errors in law occurring at the hearing and objected to at the time of the hearing.
5. A change in conditions requiring a re-examination of the original permit conditions.
6. Other reasons – (please specify).

Using the above criteria, please Identify and explain why you feel there has been an error in any requirement, permit decision or refusal made by an administrative official, or an error in fact, procedure or finding made by the Planning and Zoning Commission, Board of Adjustment, or Zoning Administrator.

Attach additional sheets if necessary. List reasons for appeal.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Send appeal form to the Town Clerk:  
[townclerklakewoodmn@gmail.com](mailto:townclerklakewoodmn@gmail.com)  
218-606-6972