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### APPEAL OF A BOARD OF ADJUSTMENT DECISION

We, the undersigned, do hereby petition the Board of City Commissioners of the City of Fargo, North Dakota, to hear and decide an appeal of a decision or determination made by the Board of Adjustment of the City of Fargo.

Property Owner Information
Name ( <i>printed</i> ): _____
Address: _____
Primary Phone: _____
Alternative Phone: _____
Fax: _____
Email: _____

Representation Information ( <i>if applicable</i> )
Name ( <i>printed</i> ): _____
Address: _____
Primary Phone: _____
Alternative Phone: _____
Fax: _____
Email: _____

Location of property involved in the appealed decision ( <i>if applicable</i> )
Address: _____
Legal Description ( <i>attach separate sheet if more space is needed</i> ): _____
_____

Reason for Appeal ( <i>attach separate sheet if more space is needed</i> )
_____
_____
_____
_____

Acknowledgement – We hereby acknowledge that we have familiarized ourselves with the rules and regulations to the preparation of this submittal and that the forgoing information is true and complete to the best of our knowledge.
Owner ( <i>Signature</i> ): _____ Date: _____
Representative ( <i>Signature</i> ): _____ Date: _____

Office Use Only
Date Filed: _____ Pre-Application Meeting Date: _____
Application Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No Reviewed By: _____