## Board of Adjustments Application City of Crittenden P.O. Box 207

Crittenden, KY 41030 Phone: 859-428-2597 Fax: 859-428-2419

Property Owners Nam	ne:		
Mailing Address:			
Phone:			
Location of Property:	<u> </u>		•
Zoning of Property:			
REQUEST:	Conditional Use Permit Dimensional Variance P Appeal Administrator D	ecision	
	THE STATE OF THE S		
Property Owner Signa	ıture	Date	<u>.</u>
Domingontative of Ame	olicant	Date	
Representative of App			<del></del>