



Department of Land Use

NEW CASTLE COUNTY  
BOARD OF LICENSE, INSPECTION & REVIEW

APPLICATION FOR HEARING

I.

Applicant Name

Legal Owner Name

Applicant Address

Legal Owner Address

Subject  
Property: \_\_\_\_\_ / \_\_\_\_\_  
Location/Address Zoning Classification

\*Tax Parcel Number (Found on Property Tax Bill or call County Assessment at 395-5400)      \*\*Hundred (Appoquinimink, Blackbird, Brandywine, Christiana, Mill Creek, New Castle, Pencader, Red Lion, St. Georges, White Clay Creek)

II. PLACE CHECK MARKS ON THE APPROPRIATE LINES AND FILL IN REQUIRED INFORMATION:

Has a previous application for this property been filed with the Board? \_\_\_ No; \_\_\_ Yes- App. No.: \_\_\_\_\_  
Previous Hearing Date \_\_\_\_\_.

Has a previous application for this property been appealed to the Superior Court? \_\_\_ No; \_\_\_ Yes. If yes, give status. \_\_\_\_\_.

- Attached is a copy of document(s) relevant to the subject of the appeal.
- Attached is the appropriate filing fee made payable to NEW CASTLE COUNTY.  
Fee schedule: \$500.00 Appeal of a Rule to Show Cause Decision  
\$250.00 Appeal of a Civil Penalty Appeal Decision
- This application was filed on \_\_\_\_\_, within the required time.

III. CHECK THE APPROPRIATE SECTION BELOW AND FILL IN THE REQUIRED INFORMATION PERTAINING TO THE TYPE OF RELIEF REQUESTED.

Appeal from administrative decision by \_\_\_\_\_ dated \_\_\_\_\_, regarding \_\_\_\_\_ for the following reasons: \_\_\_\_\_

[ ] Seek interpretation of the New Castle County Code pertaining to Section \_\_\_\_\_, because

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

[ ] Seek extension of time within which to comply with \_\_\_\_\_,  
because \_\_\_\_\_

\_\_\_\_\_.

[ ] Seek some form of relief other than that set forth above: \_\_\_\_\_

\_\_\_\_\_

State reasons for this request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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#### IV. SIGNATURE

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Name (PLEASE PRINT)

\_\_\_\_\_  
Telephone Number:

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

\*If necessary, an additional sheet may be added to this application form.