



**PINAL COUNTY**  
WIDE OPEN OPPORTUNITY

PINAL COUNTY BOARD OF ADJUSTMENTS AND APPEALS APPLICATION FOR AN APPEAL OR INTERPRETATION  
WITHIN AN UNINCORPORATED AREA OF PINAL COUNTY, ARIZONA

(All Applications Must Be Typed or Written in Ink) and submitted via the online portal site at

<https://citizenaccess.pinalcountyaz.gov/CitizenAccess/>

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**Please note that the Board of Adjustments and Appeals authority extends only to the interpretation of the Ordinance, not to making amendments to it.**

The Pinal County Board of Adjustments and Appeals is authorized to:

Interpret the Zoning Ordinance when the meaning of any word, phrase or section is in doubt, when there is dispute as to such meaning between the appellant and the enforcing officer or when the location of a zone boundary is in doubt;

1) Which of the categories above applies to this application? \_\_\_\_\_

2) Chapter(s) numbers involved: \_\_\_\_\_

3) Section(s) numbers involved: \_\_\_\_\_

\_\_\_\_\_

4) Please explain, in detail, your interpretation of this Section of the Ordinance. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5) Explain the exact conflict involved with your interpretation and that of the Planning Department.

\_\_\_\_\_

\_\_\_\_\_

6) Reasons for this request:

\_\_\_\_\_

\_\_\_\_\_

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INV#: \_\_\_\_\_ AMT: \_\_\_\_\_ DATE: \_\_\_\_\_ CASE: \_\_\_\_\_ Xref: \_\_\_\_\_

COMMUNITY DEVELOPMENT  
Planning Division

THIS APPLICATION MUST BE SUBMITTED IN PERSON

I certify that I have submitted all of the required information and that the information is factual. I also understand if the application is incomplete upon submission, it cannot be further processed and may be delayed until a future hearing date.

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Name of Applicant	Address	Phone #
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ALL NOTICES WILL BE MAILED TO THE APPLICANT UNLESS OTHERWISE NOTED:

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Name and address of person to be notified	Phone #
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Signature of applicant	Date
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Signature of applicant	Date
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APPEAL SUBMITTAL CHECKLIST  
Chapter 2.155, Section 2.155.060

The following information must be submitted as part of this application for an appeal or interpretation of the Zoning Ordinance:

Check if Completed

- \_\_\_\_\_ 1. Completed application for an Appeal or Interpretation.
  
- \_\_\_\_\_ 2. Evidence to support your interpretation. (i.e.) dictionary meanings, legal definitions, common practices in other applicable jurisdictions, manufacturer’s specifications, state or federal regulations.
  
- \_\_\_\_\_ 3. Non-refundable filing fee for a variance based on the following if applicable
  - A. Residential with 0-499 mail-outs \$500.00
  - B. Commercial, industrial or transition with 0-499 mail-outs: \$2,084.00
  - C. Understand that a newspaper publication must be advertised for this variance case per Pinal County staff instructions no later than 28 days prior to the hearing date as assigned. The applicant is responsible for all publication fees.
  
- \_\_\_\_\_ 4. Signed Appeal Checklist.

I certify that I have submitted all of the required information listed above, and I understand that this application for an appeal or interpretation cannot be processed until all required information is submitted.

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Signature

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Date

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Signature

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Date