



Case No. \_\_\_\_\_  
 Application Date \_\_\_\_\_  
 Application Fee \$50.00 \_\_\_\_\_

City of Branson West, Missouri

**APPLICATION**  
**APPEAL APPLICATION**  
**MAJOR SUBDIVISION – PRELIMINARY PLAT**

We, the undersigned, hereby appeal to the Board of Aldermen of the City of Branson West, Missouri, the decision of the Planning and Zoning Commission regarding disapproval of the preliminary plat for the subdivision as described in the application below. We attest to the truth and correctness of all facts and information presented with this application for appeal.

Name of Proposed Subdivision \_\_\_\_\_

Date of Planning and Zoning Commission decision appealed \_\_\_\_\_

Description of decision appealed \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Attach a statement indicating how the preliminary plat is in conformance with the platting requirements of the *Branson West Subdivision Regulations*.

Attach a statement describing the nature of the determination that is requested from the Board of Aldermen.

Property Owner's Name(s) \_\_\_\_\_

If Corporation, Corporate Official and Seal: \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

**PROPERTY OWNER'S SIGNATURE:**

\_\_\_\_\_  
 (If corporation, corporate official signature)

Applicant's Name (if different than property owner) \_\_\_\_\_

If Corporation, Corporate Official and Seal \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

**APPLICANT'S SIGNATURE:**

\_\_\_\_\_

**CHECKLIST  
MAJOR SUBDIVISION  
PRELIMINARY PLAT APPEAL  
City of Branson West, Missouri**

This checklist is provided to help you make sure that you submit everything that is required for a complete appeal application to the Board of Aldermen regarding a major subdivision preliminary plat. This application must be complete and all items listed on the attached checklist must accompany the application before the application will be forwarded to the Board of Aldermen. The application must be submitted no later than 4:30 p.m. to the Branson West City Hall, within 60 working days of the date of the decision of the Planning and Zoning Commission. Please contact the City Clerk at the telephone number below for Board of Aldermen meeting dates.

<b>APPLICATION FORM:</b>	
	Name of the proposed subdivision.
	Date of the Planning and Zoning Commission decision on the preliminary plat that is being appealed. Appeals must be filed within 60 working days of the date of the decision by the Commission.
	Describe the decision that is being appealed.
	Describe the nature of the determination that is requested from the Board of Aldermen and provide a written response indicating how the preliminary plat for the proposed subdivision is in conformance with the platting requirements of the <i>Branson West Subdivision Regulations</i> . It is the applicant's responsibility to provide evidence establishing the grounds for appeal.
	List the current property owner's name, address, and telephone number. If a corporation, list the corporate official and include the corporate seal.
	Property owner, or if applicable, a corporate official must sign the application.
	If the applicant is different than the property owner, list the applicant's name, address and telephone number. The applicant must sign the application.
<b>APPLICATION FEE:</b>	
	Include the \$50.00 application fee.
<p><b>Note: The Board of Aldermen <u>shall not</u> take final action on any case when the applicant or applicant's agent does not appear at the meeting before the Board to provide evidence regarding the applicant's appeal.</b></p>	

**Submit Applications to:**

Branson West City Hall  
110 SilverLady Lane  
P.O. Box 2229  
Branson West, MO 65737  
(417) 272-3313