



Board of Zoning Appeals Application

221 East Clark Street

Albert Lea, Minnesota 56007-2496 • 507-377-4330

Please fill out the application below and submit to the City Manager's Office, 221 East Clark St., Albert Lea, MN or email to ktukua@ci.albertlea.mn.us.

The board of appeals shall have the following authority and duties:

1. Hear, decide and recommend to the council, in accordance with provisions of this division and chapter 74 pertaining to zoning, interpretation of chapter 50 and the zoning map;
2. Administrative review of the decisions of the inspection division including, but not limited to, all matters related to building construction;
3. Hear and recommend the granting or denial of variances to the council.

Meets when called.

Name: _____

Address: _____

Phone: (home) _____ (work) _____ (cell) _____

Email address: _____

1. Why are you interested in serving on the Board of Zoning Appeals?

2. What past experiences do you have that will help you in this position?

3. How long have you been a resident of Albert Lea? _____

Where did you live prior to moving to Albert Lea? _____

Why did you choose to locate in Albert Lea? _____

4. Describe yourself and past work experience, hobbies and interests (or attach resume).

5. What contributions do you feel you can make to the Charter Commission?

** Please use additional sheets if necessary

The City of Albert Lea strives for transparency in how it governs. City leaders believe it's important that the public know who serves on city boards and commissions. Board and commission members also play an important role in city government by serving as liaisons between city government and local residents, sharing information and input. As such, the city would like to post your name, city of residence, and phone number or email on its website: <https://cityofalbertlea.org/boards-and-commissions>. Also, your name and contact information are considered public data under Minnesota law ([Data Practices statute 13.60](#)), meaning the city must provide the information if a member of the public requests it. By signing this application, you acknowledge that this information is public and will be posted on the city's website.

Signature _____ Date _____