

The undersigned does hereby request: _____ Variance _____ Zoning Change

Applicant/Owner Information:

Name of Applicant(s): _____

Address of Applicant(s): _____

Home Phone: _____ Cell Phone: _____

Name of Owner(s) (If different from applicant): _____

Owner Home Phone _____ Cell Phone: _____

Subject Property

Address: _____

Legal Description: _____

Reason for Variance/Zoning Change: _____

Zoning Change Only:

Property is Currently Zoned: _____

Requested Zoning Classification: _____

In the event of a variance, the applicant must provide written support from the adjacent/affected neighbors showing their agreement with the requested variance.

Applicant(s) Signature: _____ **Date** _____

Request for Variance/Zoning Change Fee: \$10.00. Please pay at the time of application.

For Office Use Only:

Board of Adjustments Meeting Held On: _____ Approved: _____ Denied: _____

Zoning Administrator Signature: _____ Print Name: _____