

Meeting Date: _____



**BOARD OF ADJUSTMENT
APPLICATION FOR VARIANCE
FEE: \$ 150.00**

***Applicants are responsible for attending the meeting and providing proof of a hardship.**

Name (applicant): _____ Phone: _____

Address: _____ Email: _____

Name (owner): _____ Phone: _____

Address: _____ Email: _____

Property address where variance is sought: _____

Legal Description: _____

Site Plan Required: A “top view” or overhead plan, drawn to scale, showing all existing and proposed buildings, structures, fences, lot lines, dimensions and other relevant information regarding the request shall be submitted with all applications.

Brief statement regarding the variance desired: _____

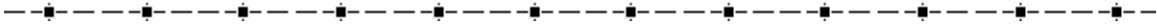
Brief statement explaining how your request meets the following criteria:

Describe special conditions specific to the property (irregular lot boundary, size, unusual topography, etc.) that make it difficult to meet the ordinance requirements and explain why the rules cause an unnecessary hardship that does not affect surrounding properties in the same way:



Applicant's Signature: _____ Date: _____

Owner's Signature: _____ Date: _____



BOARD OF ADJUSTMENT

Decision: _____

Chairperson, Board of Adjustment

Date