Meeting Date:	
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BOARD OF ADJUSTMENT APPLICATION FOR VARIANCE

FEE: \$ 150.00

	1221 (10000
*Applicants are responsible for atten	ding the meeting and providing proof of a hardship.
Name (applicant):	Phone:
Address:	Email:
Name (owner):	Phone:
Address:	Email:
Property address where variance is soug	ght:
Legal Description:	
regarding the request shall be submitted	ot lines, dimensions and other relevant information d with all applications. ce desired:
Brief statement explaining how your	request meets the following criteria:
	the property (irregular lot boundary, size, unusual
	o meet the ordinance requirements and explain why the at does not affect surrounding properties in the same way

Applicant's Signature:	Date:
Owner's Signature:	Date:
BOARD OF ADJU	JSTMENT
Decision:	
Chairperson, Board of Adjustment	Date