



## Application for Variance

Name of Applicant: \_\_\_\_\_

Name of Land Owner: \_\_\_\_\_

Block # \_\_\_\_\_ Lot # \_\_\_\_\_

Map # \_\_\_\_\_ Parcel # \_\_\_\_\_

Reason for Request:

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Zoning District: \_\_\_\_\_

Compatibility of Proposed Use with other land use in general area:

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**Office Use: Do Not Write Below This Line**

Recommendation of Zoning Administrator:

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Recommendation of Planning & Zoning:

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Decision of City Council:

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Decision Date: \_\_\_\_\_

Signature of Mayor or Authorized Person: \_\_\_\_\_

Date of Signature: \_\_\_\_\_