



VARIANCE – LAND USE APPLICATION

A variance application initiates a request for an allowance to vary from the terms of the Ordinance and is heard by the Planning Commission who will make a recommendation to the City Council. The City Council will make the final decision.

Property Address: _____

Applicant(s) Information:

Name(s) _____ Cell _____

Address _____ Home _____

City _____ State _____ Zip _____ Work _____

Owner(s) Information: (if other than Applicant(s))

Name(s) _____ Cell _____

Address _____ Home _____

City _____ State _____ Zip _____ Work _____

Owner(s) Signature(s) _____ **Date** _____

Legal description of property: _____

Property Identification Number: _____ Present zoning: _____

Present use of property: _____

Proposed use of property: _____

Description of request: _____

THIS APPLICATION AND THE FOLLOWING ATTACHMENTS MUST BE SUBMITTED TO BE CONSIDERED A COMPLETE APPLICATION:

1. A detailed map of the property showing the location of existing and proposed structures and improvements and existing land uses and buildings of adjacent properties within 500 feet. A survey is required for all setback variances.
2. A letter to the Planning Commission describing the variance request and how the request satisfies the criteria found in Section 153.188.
3. A completed Variance Worksheet (attached).
4. The variance fee and expense reimbursement deposit must be paid at the time of application. The fee is not refundable.
5. Any other information deemed necessary by the Zoning Administrator or Planning Commission. *(A variance application for a property in a Shoreland District must include a valid Septic System Certificate of Compliance)*

A PUBLIC HEARING CAN BE SCHEDULED ONLY AFTER A COMPLETE APPLICATION HAS BEEN RECEIVED.

Signature of applicant(s) _____ Date _____

(All of Section 153.188, Variances, is attached to this application and by signing this application, the Applicant acknowledges that it has been read and understood.)

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Permit # _____ OFFICE USE ONLY Date Application Received ____/____/____

Date Complete Application Received ____/____/____ 60 Days ____/____/____ By: _____

Official

Deposit \$ _____ Fee \$ _____ Date Paid ____/____/____ Check # _____