



Permit Application for Zoning Variance

Date of application _____ / _____ / _____

Applicant name _____ Phone _____

Property owner name _____

Property street address _____

GEO PIN # (required) _____ - _____ - _____

VARIANCE REQUESTED FROM THE PROVISION _____

Reason for the Variance request: _____

Fee \$ _____

Applicant's signature _____ Date _____

Inspector's signature _____ Date _____

VARIANCE APPROVED / DENIAL

Approved _____ Denied _____ Date _____ / _____ / _____

