

APPLICATION FOR VARIANCE REQUEST

Date:	Zoning Permit Application #:			
MEMBERS OF THE BO			PPEALS	
I am requesting a hards Appeals in order to:	hip variance or zonir	ng exception from the	Board of Zoning	
Describe in detail how t (c) (3) A through D. See	-		1159.02 (b) (1) & (2) or	
\$315.00 non-residential) as stated under §11 (8 copies of all materials) Applicant □ Owner □ Builder □ Other		PROPERTY OWNER (if different from Applicant)		
Name (Print)		Name (Print)		
Signature				
Address, City, State, Zip Code		Address, City, State, Zip Code		
Phone		Phone		
Email				
	FOR OFFICE	E USE ONLY		
Date Fee Paid:	Gee Paid: Fee Paid:		Receipt #:	
Date of Decision by Board	of Zoning Appeals:			
,	O 11 —	□ APPROVED		
Comments:				