Filing	be sent to the property owner for the	hapter 165.21(3), any a preceiving the permit. In balance of the total cos e assessed to property t	dditional cost incurred by the City f the variance is not granted, a bill will st. If property owner does not pay the taxes in the same manner as stated in	
Paid		Receipt No		
I/We,	, the undersigned, do hereby reque	st that you consider th	is application for:	
	_VarianceCon	ditional Use	Appeal	
Addr	ess of Property:		Phone:	
The f	following are persons having an inte	rest in the above mer	ntioned property:	
Reco	orded Owner/s:			
Addr	ess	Phone:		
	ract Purchaser/s:			
	ee/s:			
Address				
	se respond to the following question Legal description of the subject pro		·	
2.	Present zoning classification:			
3.	Describe the existing uses in the immediate vicinity and explain whether the proposed variance/use would have any adverse affect on surrounding properties.			

4. Are there any circumstances unique to the property which do not apply to other properties in the immediate vicinity and which would result in the inability of your property to yield a reasonable return? If so, please describe.

- 5. What hardship will result if the variance/use is not granted? Explain in detail.
- 6. Explain why the conditional use you are requesting is necessary.
- 7. Will the proposed variance/use interfere with the development or use of the neighboring property? If yes, please explain?
- 8. Please provide any additional information which supports your request or appeal.

ON PENALTY OF PERJURY, I DECLARE THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT

Date

Date

OWNER

Office Use:

Date _____ Owners within _____ feet notified (list attached)

Date _____Board of Adjustments meeting held

Decision: _____

(Meeting minutes attached)