VARIANCE REQUEST APPLICATION

APPLICANT:

NAME: _____ DATE: _____
ADDRESS: _____ CITY/ST/ZIP: _____
PHONE: _____ EMAIL: _____

PROPERTY ADDRESS: _____
PIN/TAX MAP #: _____

Nature of Variance: (write below or attach)

_____
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Attached: Site Plan / GIS Map Printout

Application Number: _____ Date Submitted: _____