

**CITY OF WINFIELD
VARIANCE APPLICATION**

PART I. APPLICANT DATA

Name of Applicant: _____

Mailing Address: _____

Telephone: _____

Signature: _____

PART II. PARCEL DATA

Owner of Record: _____

Mailing Address: _____

Tax Map I.D. #: _____

Parcel Area: _____

Existing Land Use: _____

Existing Zoning: _____

PART III. REQUEST

Proposed land use: _____

Existing land use: _____

Zoning: _____

PART IV. ENCLOSURES (Check all required enclosures with this application)

_____ Plot Plan

_____ Vicinity Map

_____ Public Hearing notices.

_____ Stamped legal-size envelopes addressed to adjacent property owners.

NOTICE: The completed application, including all required attachments, must be filed at least 30 days before the Zoning Board of Adjustment hearing. The applicant must be present at the hearings.

PART V. FOR OFFICE USE ONLY:

Case # _____

Date received: _____

By: _____

Scheduled Public Hearing date: _____