

VARIANCE APPLICATION Applicant: _____ Fax: _____ Fax: _____ Address: _____ City Street Zip Code State **Owner**: _____ Fax: _____ Address: ____ Street City State Zip Code Premises Involved: _____ Address/ Legal Description (lot, block, plat name, section, township, range) Current Zoning District ______ Current Land Use _____ Specific Nature of Request / Claimed Practical Difficulties: SUBMITTAL REQUIREMENTS ____ Proof of Ownership ____ Copies of Site Plan ____ Abstract/Residential List (adjoining property owners only) ____ Application Fee Boundary / Lot Survey ____ Torrens (Owner's Duplicate Certificate of Title Required) Signature of Property Owner Date Signature of Applicant Date Request Submitted to the Planning Commission on For office use only Public Hearing Set for: _____ Advertised in Local Newspaper: ____ Planning Commission Action: _____Approved _____Denied Fee Paid \$250 – City of Farmington Comments: Conditions Set: Planning division: _____ Date: ____ 10/19