

VARIANCE APPLICATION



- CITY OF DUBOIS
- CLARK COUNTY

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|---|--|--|---------------------------|
| 1. Street/Road Address of Proposed Variance | | | |
| 2. Legal Description (Attach Legal Description) | Lot: | Block | Subvision |
| 3. Owner: | Address: | City, State, Zip Code | Phone: |
| 4. Representative: | Address: | City, State, Zip Code | Phone: |
| 5. Describe the activity for which a variance is requested. | (Plans sufficient to explain the nature of the requested variance must be attached.) | | |
| 6. City the specific ordinance from which a variance is requested. | Attach a Copy of the Notice of Decision | | |
| 7. Describe the undue hardship by which the ordinance is justified. | | | |
| 8. Signature: | <p>This signature acknowledges that all information on this application and the attached plans is true and correct, AND that the activity permitted will be conducted in full compliance with all ordinances of the City/County, State, and Federal Laws; AND that the activity conducted will be in full compliance with any and all conditions imposed on approval of the variance or the approval of previous permits required for development. Conditions attached to approval of a variance will be binding</p> <p>This permit expires in two years in the activity authorized is not commenced OR if the activity commenced but abandoned for one year at any time before completion.</p> <p style="text-align: center;">_____ Date</p> <p style="text-align: center;">Applicant Signature</p> | | |
| FOR OFFICIAL USE ONLY | | | |
| Application Accepted by: | | Date: | Application Fee Received: |
| Notice Published: | Notice to Owners: | Commission Hearing: | Notice of Decision: |
| Commission/Council/BOCC Action | | Variance: | |
| Motion By: | Seconded By: | <input type="checkbox"/> Approved <input type="checkbox"/> Denied | |
| _____ Signature | | _____ Date | |
| Conditions Imposed: | (Additional Sheets may be used) | | |