

PLANNING COMMISSION VARIANCE REQUEST FORM

Applicant Name _____

Project Name _____

Project Address _____

Tax Map _____ Group _____ Parcel _____

Type of Variance (Must Check One Only)

- | | | |
|--|--|---|
| <input type="checkbox"/> Access | <input type="checkbox"/> Building Materials | <input type="checkbox"/> Open Space |
| <input type="checkbox"/> Block Length | <input type="checkbox"/> Building Setback | <input type="checkbox"/> Pedestrian Circulation |
| <input type="checkbox"/> Block Perimeter | <input type="checkbox"/> Building Transparency | <input type="checkbox"/> Screening |
| <input type="checkbox"/> Building Articulation | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Other (Describe Below) |

Describe the nature and location of the variance request

Describe the hardship or reasoning for the variance request

Date of Planning Commission Meeting _____

A variance application is required for each requested variance, including when the same variance is requested in multiple locations. A \$100 fee is required for EACH variance request. This fee is required to be paid by NOON on the Friday before the scheduled Preliminary Planning Commission Meeting. A variance request does not assure that the variance will be granted by the Planning Commission, nor that the City of Lebanon staff support the requested variance. The Planning Director reserves the right to reject an incomplete variance application or an application for lack of payment. Upon signature of this application, the applicant acknowledges that they have read and agree to the above stipulations and that all information provided in the application is accurate to the best of their knowledge.

Applicant Signature _____ Date _____

For Staff Use Only Date Submitted _____ _____
--