

TOWN OF CLOVERLAND – APPLICATION FOR SETBACK VARIANCE

OWNER'S NAME _____

APPLICANT'S NAME (IF DIFFERENT FROM OWNER) _____

MAILING ADDRESS _____

CONTRACTOR'S NAME _____

TELEPHONE NUMBER _____ E-mail _____

TAX PARCEL NO: _____ COMPUTER NO: _____

PROPERTY ADDRESS/FIRE # _____

LEGAL DESCRIPTION ___ 1/4 ___ 1/4 OR GOV'T. LOT ____, SECTION ____, T40N,
R9E

APPROXIMATE LOT DIMENSIONS ___ X ___ LOT AREA ___ SQ.FT./ACRES

ZONING DISTRICT _____

CURRENT USE & IMPROVEMENTS _____

PROPOSED USE & IMPROVEMENTS _____

TO QUALIFY FOR A VARIANCE, APPLICANT MUST PROVE 3 REQUIREMENTS LISTED BELOW:

UNNECESSARY HARDSHIP DESCRIBE HOW STRICT APPLICATION OF THE ORDINANCE REQUIREMENT (SETBACK) WILL RESULT IN AN UNNECESSARY HARDSHIP

UNIQUE PHYSICAL LIMITATIONS OF THE PROPERTY DESCRIBE HOW COMPLIANCE WITH THE ORDINANCE IS PREVENTED BY UNIQUE PHYSICAL LIMITATIONS OF THE PROPERTY (STEEP SLOPES, WETLANDS, ETC.)

NO HARM TO PUBLIC INTEREST DESCRIBE HOW A VARIANCE WILL NOT BE CONTRARY TO PUBLIC INTEREST.

ATTACH SCALED DRAWING OF THE PROPERTY SHOWING EXISTING STRUCTURES, PROPOSED STRUCTURES WITH DIMENSIONS TO LOT LINES & PUBLIC ROADS.

ATTACH DRIVING DIRECTIONS FROM THE TOWN HALL TO THE PROPOERTY STAKEOUT THE PROPOSED BUILDING FOR INSPECTION BY THE TOWN BOARD

I CERTIFY THAT THE INFORMATION I HAVE PROVIDED IN THIS APPLICATION IS TRUE & CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SIGNED (APPLICANT/AGENT/OWNER) _____

DATE _____

Return Completed Application To:

Julie Priefer

Clerk - Treasurer - Town of Cloverland

PO Box 1565