

CITY OF ADRIAN -- Variance Request Application

Name of Applicant: _____

Address of Applicant: _____

Telephone and Fax: _____

E-Mail Address: _____

Address of Property: _____

Variance Requested: _____

Owner of Property (if not Applicant): _____

A variance to the Zoning Ordinance is requested for the following reasons (all reasons must be answered).

1. The property in question is not physically suitable for use under the limitations of the zoning district in which it is located because:

2. The hardship created is **UNIQUE** and is not shared by all properties alike in the immediate vicinity of the property and in this use district because:

3. The variance would not change the character of the district because:

NOTICE TO APPLICANT: The applicant or his representative **MUST BE PRESENT** when this comes before the Zoning Board of Appeals, or it will not be considered.

Signature of Applicant: _____

Section 27.05, (3): Each variance granted under the provisions of this Ordinance shall become null and void unless: The construction authorized by such variance or permit has commenced within 6 months of granting of the variance. The occupancy of land, premises or building has taken place within 1 year after the granting of the variance.