

**TOWN OF GROTTUES  
Variance Application**

The applicant must provide the following information to support their application:

1. A plat of the property drawn to scale showing dimensions and structures.
2. A location sketch of the property showing nearest road intersection.

Why is the variance being requested? (attach an additional explanation if necessary)

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List the names and addresses of owners or occupants of all adjoining, adjacent or property across a road, highway or railroad right-of-way.

1. NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

2. NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

3. NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

4. NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

The undersigned declares that the above statements and those contained in any exhibits transmitted to the Board of Zoning Appeals are true.

Applicant (signature) \_\_\_\_\_ Date \_\_\_\_\_

Applicant (print) \_\_\_\_\_ Telephone \_\_\_\_\_

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

**FOR ADMINISTRATIVE USE ONLY:**

**Which district is said property located in?** \_\_\_\_\_

Sent to Secretary of Board of Zoning Appeals?  Yes  No

Date sent to Secretary: \_\_\_\_\_

Public Hearing Scheduled?  Yes  No

Public Hearing Date: \_\_\_\_\_

Approval by Board of Zoning Appeals ?  Yes  No

Date Approved: \_\_\_\_\_