

# Zoning Variance Application

## Chapter 300 Zoning

To the Clerk of the Village of Balsam Lake, County of Polk

The undersigned hereby applies for a zoning variance

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Owners Name: \_\_\_\_\_ Mailing Address \_\_\_\_\_

Residential Address: \_\_\_\_\_ Preferred Phone # \_\_\_\_\_

Email Address: \_\_\_\_\_

\*\*\*\*\*

I submit the following data for the purpose of securing a variance from the dimensional standards of the Village of Zoning Ordinance: Article \_\_\_\_\_ Section \_\_\_\_\_

1. Explain how the proposed development varies from dimensional standard ordinance:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Explain the hardship imposed by zoning ordinance:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Describe unique property features that cause hardship:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Explain why the proposed variance will not harm the public interest:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please fill out the Site Plan on page two**

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Zoning Board of Appeals Meeting \$300.00 fee

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I certify that all data on my application forms; plans and specifications are true and correct to the best of my knowledge.

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

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# Site Plan

Front of Property

Rear of Property

**For Office Use Only**

Names and addresses of all abutting and opposite property owners within 100 feet:

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Property Address: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Property Address: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Property Address: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Property Address: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Property Address: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Property Address: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Application Received: \_\_\_\_\_ Variance # \_\_\_\_\_

Date of Zoning Board Meeting: \_\_\_\_\_

Zoning Board Meeting Fee Received: \_\_\_\_\_

Members who will be absent from meeting: \_\_\_\_\_

Zoning Board of Appeals Decision:    Approved    or    Denied