

Project Address:__

APPLICATION FOR VARIANCE

CITY OF BELVEDERE • PLANNING COMMISSION 450 SAN RAFAEL AVE • BELVEDERE, CA 94920-2336 PH. 415-435-3838 • FAX 415-435-0430 • WWW.CITYOFBELVEDERE.ORG

FOR STAFF USE ONLY							
			Receipt No.:				
TO BE COMPLETED BY APPLICANT							
Address:		Daytime Phone: Fax:					
Address:		Daytime Phone: Fax:					
Description of project and variance(s) requested:							
ORDINANCE §	REQUIREMENT	EXISTING	PROPOSED				

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I hereby apply for a variance from the strict interpretation of the Belvedere Zoning Ordinance to permit the construction described on the previous page. I propose that the Planning Commission make the following findings of fact in order to grant the requested variance:

- A. The granting of this variance will not constitute a grant of special privilege inconsistent with the limitations upon other properties in the vicinity and zone in which such property is situated because:
- B. Because of special circumstances applicable to the property, including size, shape, topography, location, or surroundings, the strict application of the Zoning Ordinance section would deprive this property of privileges enjoyed by other property in the vicinity and under identical zoning classification, so that a denial of the application would result in undue property loss, as follows:
- C. The granting of this variance will not be detrimental to the public health, safety or welfare, or injurious to the property or improvements of owners of other premises, or to the quiet enjoyment of their premises because:

I, the undersigned owner of the property herein described (or owner representative, as authorized by completion of a Statement of Ownership and Designation of Representative), hereby make application for the variance requested, and I hereby certify that the facts, statements and information presented herein and in the attached exhibit(s) are true and correct to the best of my knowledge and belief

Signature:

Name:		

Date:_____