

APPLICATION FOR A VARIANCE FROM THE ZONING REGULATIONS

This is an application for a variance. The form must be completed in accordance with directions on the accompanying instructions and filed with the Zoning Administrator at 211 North Second Ave., Mulvane, Kansas 67110.

(AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.)

- 1. Name of Applicant _____
 Address _____ Phone _____
 Name of Agent, if any _____
 Address _____ Phone _____
 Relationship of applicant to property is that of _____
 (Owner, Tenant, Lessee, etc.).

- 2. Application is made for a variance as provided for in Section 10-107 of the City Zoning Regulations to permit (describe request):

for property located at _____

and legally described as _____

which is zoned as the _____ District.

3. The applicant herein or his/her authorized agent acknowledges:
- a. That he/she has received instruction material concerning the filing and hearing of this matter; and
 - b. That he/she has been advised of the fee requirements established and that the appropriate fee is herewith tendered; and
 - c. That he/she has been advised of his/her rights to bring action in the District Court of the County to appeal the decision of the Mulvane Board of Zoning Appeals; and
 - d. That all documents are attached hereto as noted in the instructions; and
 - e. That the Mulvane Board of Zoning Appeals has the authority to require such conditions as are deemed necessary and reasonable in order to serve the public interest.

Applicant	Date	Agent (If any)	Date
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OFFICE USE ONLY

This application was received at ___:___ (a.m., p.m.) on _____, 19__ by the Zoning Administrator acting for the Board of Zoning Appeals. It has been checked and found to be complete and accompanied by the required documents and the appropriate fee of \$_____.

Zoning Administrator