AVON TOWNSHIP

VARIANCE APPLICATION

File No._____

Property Owner(s): _____
Name

_____
Mailing Address, City, State, Zip Phone

Property Address: _____
Address City State/Zip

Parcel No. _____

Legal Description: (**Copy of Deed, Certificate of Survey required upon receipt of this form.**)

****STAFF TO COMPLETE****

Applicant requests variance from Section(s) _____ of Avon Township Ordinance(s) No(s) _____

The intended use that does not comply with the ordinance(s) is: _____

_____

_____

_____

_____

_____

****APPLICANT TO COMPLETE****

The grounds for requesting the variance are as follows: (Explain why the strict enforcement of the ordinance(s) will cause an unnecessary hardship or the strict conformity of the standards are unreasonable, impractical, or not feasible under the circumstances.) _____

_____

_____

_____

_____

_____

I hereby swear and affirm that the information supplied to Avon Township is accurate and true. I acknowledge that this application is rendered invalid and void should the Township determine that information supplied by me, the applicant, in applying for this variance, is inaccurate or untrue.

Signature: _____ **Dated:** _____
Property Owner

Fee: (Non-Refundable): $ _____ Receipt No. _____

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