

AVON TOWNSHIP

VARIANCE ACTION

Date:

Name:

Address:

Re: Variance File #: _____

Parcel #: _____

This document will serve as notice that the following action was taken at the _____ (*insert date*) meeting of the Avon Township Board of Supervisors.

A variance request from Section _____ of Avon Township Ordinance # _____ to:

This action was: approved/denied

Signatures:

Avon Township Chair

Avon Township Clerk

Date: _____