

City of Sylvania
APPLICATION for VARIANCE
BOARD of ZONING APPEALS

Applicant's Name: _____

Mailing Address: _____

Email: _____ Telephone Number: _____

1. Property Address: _____

2. Legal Description: _____

3. Zoning Classification _____

4. Describe briefly the nature of the Variance requested: _____

Information to accompany application:

1. Site or Plot Plan - Survey required for Side and Rear Yard Variances
2. Letter of Intent Outlining Special Conditions
3. Filing Fee of: Residential \$275.00 + Cost of Ad
 Commercial \$500.00 + Cost of Ad

I certify that the information contained in this application and its supplements is true and correct.

Applicant's Signature

Date

.....
For Office Use Only
.....

Date: _____ Check #: _____ Cash: \$ _____ Cost of Ad: \$ _____ Application Fee: \$ _____