City of Combstone

#.O. Box 339, Tombstone, AZ. 85638 PHONE (520) 457-2202 - Fax (520) 457-3516

Variance Application

(Please print or type) NO PENCIL
See Attached Requirements (COT Code Title 10, Chapter 16)

Property Owner:			
Phone:			
Owner's Mailing Addre	ss:		
City:		State:	Zip:
Authorized Representa	tive:		
Phone:	Email:		
Rep's Mailing Address:			
City:		State:	Zip:
Property Address:			
City:		State:	Zip:
Parcel Number(s):			
Zoning: Requi	red Setbacks:	Front Side	es: Rear:
Does subject parcel ha	ve an active bu	ıilding/zoning c	ode violation?

Provide and attach a request letter which includes a detailed explanation and a justification for all of the variance(s) that you are requesting including information explaining why the variance is necessary. Within your letter, please address the following:

- State the specific variance you are requesting. (e.g. To reduce the front yard setback to 15 feet for a proposed room addition.)
- Is the variance being requested for an existing structure, or a proposed structure?
- Is this variance being requested because of a building or zoning code violation?

 Address the specific hardship. Why is this variance needed? Why can't the proposed variance be constructed in a different way, or a different location?

Provide a site plan showing the lot(s) or sign(s) involved in the variance request. If the site plan is larger than $8\frac{1}{2}$ " x 11", please provide 10 copies folded to $8\frac{1}{2}$ " x 11".

List the names and addresses of all persons, firms or corporations appearing on public record as owning property within the area proposed to be affected within three hundred feet (300') of any part of the property for which a variance is requested. The list must include the names of all persons purchasing land under recorded contracts of sale, and must be certified as to completeness by the applicant or some person otherwise qualified by knowledge of the public records.

We hereby understand and consent to the variance requested by the above listed property owner

<u>Name</u>	<u>Address</u>		<u>Date</u>
		,	

There may be a		ven if the variance is not ap ty is in violation and prope	
Please accept a listed property:	nd process my applicatio	on for a variance for the abo	ove
Print Name:		Date:	
Signature:			