

TOWN OF CENTER  
9119 County Trunk A  
Evansville, Wisconsin 53536  
TELEPHONE: (608) 876-6265

**TOWN OF  
CENTER**  
**ROCK COUNTY**

TOWN USE ONLY	
Application Number:	
Received By - Date	
(MM/DD/YYYY):	

**Variance – APPLICATION FORM**

**1. Type of Variance**

- ☐ Area variances provide an increment of relief (normally small) from a physical dimensional restriction such as a building height or setback.
- ☐ Use variances permit a landowner to put a property to an otherwise prohibited use. Use variances are prohibited in shoreland zoning.

**2. Describe variance request. Attached a sketch if applicable.**

**3. To qualify for a variance, an applicant has the burden of proof to demonstrate that they meet all three variance standards**

**3a. Unnecessary hardship** - Unnecessary hardship is present when compliance with the ordinance would do one of two things:

- Unreasonably prevent the owner from using the property for a permitted purpose. For example, if a lot is zoned residential, would complying with the ordinance prevent the lot from being used for a home.
- be unnecessarily burdensome in view of ordinance purposes

**3b. Conditions unique to the property** Conditions unique to the property such as steep slopes or wetlands must prevent compliance with the ordinance. If an alternative location exists on the property that would not require a variance, this standard is not met. Not every small or steep property meets this standard.

**3c. No harm to the public interests** A variance granted may not harm public interests. "Public interests" are the purpose and intent of the ordinance that were adopted by the elected officials representing the community.

**APPLICANT INFORMATION**

<b>4. LANDOWNER OR AUTHORIZED LANDOWNER REPRESENTATIVE</b>									
a. Name:						Telephone:			
Address:				City:		State:		Zip:	
b. Name:						Telephone:			
Address:				City:		State:		Zip:	
E-mail address:									
<b>5. AGENT (SURVEYOR AND DEVELOPER)</b>									
a. Surveyor name:						Telephone:			
Address:				City:		State:		Zip:	
b. Developer name:						Telephone:			
Address:				City:		State:		Zip:	
E-mail address:									
6. Please identify the individual from 4. or 5. that will serve as the primary contact:    4a. <input type="checkbox"/> 4b. <input type="checkbox"/> 5a. <input type="checkbox"/> 5b. <input type="checkbox"/>									
<b>Variance INFORMATION</b>									
7. /variance location:		Town of				1/4 of		1/4	
		Section				Tax parcel number(s) -			
8. variance is located adjacent to (check all that apply):									
<input type="checkbox"/> Local/Town road <input type="checkbox"/> Rock County highway <input type="checkbox"/> State highway <input type="checkbox"/> U.S. highway									
9. Landowner's contiguous property area (Square feet or acres):					10. Variance area (Square feet or acres):				
<p>I, as the undersigned, am a landowner applying for are-a variance the Town of Center in unincorporated Rock County, or am serving as the primary contact for said landowner. I do hereby verify that I have reviewed the <i>TOWN OF CENTER VARIANCE – APPLICATION FORM INFORMATION</i>, reviewed and completed this application form, and submitted all information as required per said documents, and that all information is correct, accurate, and true to the best of my knowledge and belief, with all information accessible to me. These statements are being made to induce official action on the part of the Town of Center, its agents, employees, and officials.</p>									
LANDOWNER/PRIMARY CONTACT SIGNATURE:						DATE:			

THANK YOU FOR COMPLETING THE *TOWN OF CENTER APPLICATION FORM*. PLEASE PROVIDE ADDITIONAL PAGES AS NEEDED.