

LEE COUNTY
CITY OF LEESBURG
CITY OF SMITHVILLE



VARIANCE APPLICATION

OWNER: _____

ADDRESS: _____

DAYTIME PHONE #: _____ EMAIL: _____

ADDRESS OR LOCATION OF PROPERTY: _____

In order that the general health, safety and welfare of the citizens may be preserved, and substantial justice maintained, I (We) the undersigned request in connection with the property hereinafter described:

Present Zoning _____ Present Use of Property: _____

_____ Land Lot Number _____ Land District _____ # of Acres

Reasons for requesting variance:

ALSO ATTACH: (1 copy of each) _____ Plat of property, including vicinity map

_____ Legal description Containing Metes and Bounds

I hereby certify that I am the owner and/or legal agent of the owner, in fee simple of the above-described property.

WITNESS _____

OWNER _____

DATE: _____

DATE: _____

Application Fee: _____ Date Paid: _____ Received by: _____

In my absence, I authorize the person named below to act as the applicant in the pursuit of action for the application.

Applicant Name: _____

Address: _____

Phone #: _____ Email: _____