



TOWN OF SPRINGERVILLE

"GATEWAY TO THE WHITE MOUNTAINS

APPLICATION FOR VARIANCE OR APPEAL

Name of Applicant(s)
*(Applicant must be the legal owner or
Show Power of Attorney)*

Parcel Number(s)
(Attach legal description)

Applicant Mailing Address

Property Address

Applicant Telephone Number(s)

Current Zoning Classification

Reason Variance is being requested: check all that apply:
Lot Coverage ___ Lot Size ___ Lot Width ___ Sign ___
Parking ___ Setbacks ___ Height & Area Req. ___
Nonconforming Use ___ Accessory or Special Use ___
Fence ___ Landscaping ___

Signature of Applicant(s)

See Page 2 for required documentation

Date

Fee: \$ _____

Received By: _____

Date Stamp:

Neighborhood Meeting: _____

P&Z Hearing: _____ Notice Date: _____

Action: _____

Confirmed By: _____

All documentation MUST be submitted before an application is complete

Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1.