

Application for a

VARIANCE or WAIVER

Email:

13646 Perkins Rd, 70810 225-228-3200 planning@stgeorgela.gov StGeorgeLA.gov This application is for variances or waivers to specific regulations as authorized by the UDC. Property Requested Variance or Waiver Section number(s) from which a variance or waiver Street Address: is requested (from the Code of Ordinances) Current Zoning District: Current Use: Property Owner: This application must include sufficient **information** to describe the requested variance **Applicant** or waiver. Check which of the following are submitted: Property Owner Other: Site Plan or other drawings. Drawings shall be dimensioned. **Descriptive Information**. Describe the Business, if applicable: specific requested variance in the space below or on attached sheets, including the hardship Mailing Address:_____ and reason for the requested variance/waiver. City, State, Zip:_____ Phone #_____ I attest that all information provided with this application is true and correct, and that I am authorized to submit this application. For cases that have a public hearing, I agree that: (a) the City will place a sign on the property and that it will remain throughout the process; and (b) I or a designated representative will attend the public hearing. **Required Attachments** Signature of Applicant Date Fees; please speak with a Planner to confirm **Additional Authorized Representative** Signature of Owner, if not Applicant Date Only if applicable Received By: Received Date: Fee \$ Receipt# Name:_____ Related Case(s): Case #

BOA PC Admin Meeting Date: