## **VARIANCE PERMIT APPLICATION**

Perkins Township Community Development 2610 Columbus Ave., Sandusky, OH 44870 www.perkinstownship.com (419) 609-1435

\*Must download and save application before the signature or submittal options are available.



PROPERTY OWNER INFORMATION				APPLICANT TO PROVIDE
OWNER NAME				1. Non-refundable
OWNER ADDRESS				application fee of \$350.00, plus \$25 per
				each additional variance required (Fees may be
HOME PHONE	CELL PHONE		EMAIL ADDRESS	paid by cash, check, or
				credit card (5% convenience fee). Checks
APPLICANT INFORMATION				should be made out to
APPLICANT NAME				"Perkins Township").
APPLICANT				2. Two (2) copies of the
ADDRESS				application from and all supporting documents.
(CITY STATE ZIP)				0
PHONE				3. Supporting Documents:
HONE				<ul> <li>Legal description of the property.</li> </ul>
EMAIL ADDRESS				<ul> <li>Site plan, including</li> </ul>
				dimensions and setback distance(s) of all
PROPERTY/LOCATION INFORMATION				proposed structures or land uses.
PARCEL NUMBER	CURRENT ZONING		ACREAGE	<ul> <li>Narrative explaining how</li> </ul>
				the variance will affect the surrounding area.
ADDRESS	SUBDIVISION			<ul> <li>"Letter of Authorization,"</li> </ul>
VARIANCE REQUESTED				if applicable.
REASON FOR THE VARIANCE				
A DDI ICATIONIA UTHODIZATION				
APPLICATION AUTHORIZATION	11.1.0			
**I hereby certify that I am the owner and/or applicant and knowledge. All official correspondence in connection with				o the best of my
PRINT: Owner /	<b>F</b> F		DATE:	
Applicant				
SIGNATURE: Owner / Applicant				
Please note that authorized agents of the property owner napplication, and communicate on their behalf.	nust also submit a "Letter	of Authorization" from	the property owner to repr	esent them, submit the
STAFF REVIEW				
Submittal Date: • Walk I	n o Mailed	o Emailed		Processed By:
Signature			Title	Date