

CITY OF AUBURN

ZONING VARIANCE REQUEST FORM

FOR OFFICE USE:	
Date Received	
Amount Paid	
Date Published	
<input type="checkbox"/> APPROVED	
Date	
<input type="checkbox"/> DENIED	
Date	

DATE OF APPLICATION: _____
FEE: \$300 PLUS COST OF LEGAL PUBLICATION

1. _____ Phone# _____
NAME OF OWNER(S)

MAILING ADDRESS OF PROPERTY OWNER

2. **LEGAL DESCRIPTION** (INCLUDING ADDRESS IF DIFFERENT FROM ABOVE):

3. **CURRENT ZONING CLASSIFICATION:**
- | | |
|---------------------------------------|------------------------------|
| _____ A-1 AGRICULTURE | _____ B-2 BUSINESS GENERAL |
| _____ R-1 RESIDENTIAL SINGLE FAMILY | _____ B-3 BUSINESS GENERAL |
| _____ R-2 RESIDENTIAL GENERAL | _____ I-1 INDUSTRIAL LIMITED |
| _____ R-3 RESIDENTIAL MULTI-FAMILY | _____ I-2 INDUSTRIAL GENERAL |
| _____ B-1 BUSINESS OFFICE & RETAILING | _____ RM-4 MOBILE HOME PARKS |

4. **REASON FOR VARIANCE REQUEST:**

5. **ADJOINING PROPERTY OWNERS**

OWNERS	ADDRESS	ZONING
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SKETCH OF AREA (USE REVERSE SIDE IF MORE SPACE NEEDED):

SIGNED: _____

DATE: _____