

(Top 3 inches reserved for recording data)

APPLICATION FOR BOARD OF ADJUSTMENTS

To: Freeborn County Board of Commissioners
Freeborn County Board of Adjustments

Date: _____, 20____

Name of Firm or Applicant: _____

Address: _____

Phone: _____

Property Legal Description:

The variance request and a statement outlining the unique or particular situation or peculiar hardship involved in creating the need for a variance:

The following information that may be applicable is required as part of the application:

- 1.) The names and addresses of owners of the property or any persons having a legal interest therein.
- 2.) A site plan showing all pertinent dimensions, buildings and significant natural features having an influence on the variance.
- 3.) All necessary State and Federal permits.

Said property being located in a district zoned as _____ Present Use _____

Permit fee required: \$400.00 (Non-Refundable) Septic Compliance completed Yes N/A
Make check payable to: Freeborn County Treasurer

Applicants Signature

Date

SPECIAL PERMIT

No. _____

Remarks:

Further it is expressly understood that this permit shall become invalid if the conditions imposed are not complied with.

This permit approved by _____ this _____ day of _____ 20____.

Freeborn County Zoning Official