



\$250.00 Fee
Check/Cash _____
Receipt # _____

APPLICATION FOR RESTRICTIONS VARIANCE

STATE OF ALABAMA)
TOWN OF MAGNOLIA SPRINGS)
COUNTY OF BALDWIN)

This is to certify that I (we) the undersigned do hereby request the Town of Magnolia Springs Board of Adjustment to grant a variance from the restrictions of the Zoning Ordinance as indicated below, and for the reasons stated:

1. Description of property for which amendment is requested:
 - a) Physical address: _____
911 address, if available: _____
 - b) Name of Subdivision plat: _____
 - c) Lot numbers involved in change: _____
 - d) Total acreage of change: _____
 - e) Parcel I.D. Number: ___ - ___ - ___ - ___ - ___ - ___ - ___ - ___ - ___ - ___
PPIN# ___ - ___ - ___ - ___
 - f) Recorded in Plat Book Number: _____
Page Number: _____
 - g) Owned in whole by the undersigned: _____
 - h) If owned in part, name(s) of co-owner(s): _____

2. Article(s) and Sections(s) for which this variance is requested:

<u>Section</u>	<u>Article</u>
_____	_____
_____	_____
_____	_____

3. Nature of variance requested:

4. Reason for request:

Dated this _____ day of _____, _____

Owner (s) or Authorized Representative

For Office Use Only:

Date Received: _____

By: _____

Set for Board of Adjustment Meeting

Date: _____

Variance:

Granted: _____

Denied: _____

Signed by: _____

It's: _____

Date: _____