

TOWNSHIP COOPERATIVE PLANNING ASSOCIATION -- CONSIDERATION OF VARIANCE REQUEST APPLICATION

4111 11th Avenue SW Room 10
Rochester, MN 55902

-- TCPA --

(507) 529-0774
Fax: (507) 281-6821

TOWNSHIP _____ DATE _____

Property Address _____

_____ City _____ State _____ Zipcode _____

Legal Property Description _____

Property Owner _____ Telephone # _____

_____ City _____ State _____ Zipcode _____

Request Description (See back of page for submittal requirements) _____

Reason for Request _____

Existing Use of Property _____

Present Zoning Classification _____

Has a variance request on the property been previously sought? Yes No

If Yes, when? _____

Signature of Applicant _____ Date _____

Filing Fee \$ _____, made payable to TCPA

.....

Public Hearing was held by the Town Board of Appeals on _____

After consideration of the Public Hearing and the recommendations of the Zoning Administrator,

_____ Township Board of Appeals, Approved Denied for the

following reason(s) _____

Appeals Board Chairperson

Attest _____
Township Clerk

- A. Criteria for Granting a Variance may be granted only in the event that the Board of Adjustment finds evidence that all the following facts and conditions exist:
1. Effect on the health, safety and general welfare of the current and future occupants of the property and adjacent properties and general public.
 2. Effect on the natural and human-influenced environmental of the vicinity.
 3. Exceptional circumstances that may apply.
 4. Role of the applicant.
 5. Intent of the ordinance.