

City of Garden City Variance Application



Development Information

Development Name (If applicable)	
Property Address	
Current Zoning	Current Use
Parcel ID	Total Site Acreage
Section of the zoning code from which you are seeking a variance:	
Describe the variance request you are requesting.	
Would denial of this request create practical difficulty or an unnecessary hardship?	
Does the property have extraordinary and exceptional conditions because of its size, shape or topography?	
Are the conditions of the property unique to this piece of property?	
Would approval of this variance request cause any detriment to adjoining properties or the community?	
Please provide any additional information that you deem relevant.	

A sketch or site plan of the property, including the details variance request, is required. A hand-drawn sketch is permitted provided it is legible. Attach additional information as necessary.

Is a sketch or site plan attached? ☐ Yes ☐ No

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Applicant Information

Owner	
Name	Address
Phone	Email
Nature of Ownership Interest	
Is the Owner an: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Firm <input type="checkbox"/> Corporation <input type="checkbox"/> Association Note: If a corporation, submit a list of officers, directors & major stockholders with name, address and title. If a partnership, submit list of all partners with name, address and title.	
Engineer/Surveyor <input type="checkbox"/> Same as authorized agent <input type="checkbox"/> Check here to receive staff review comments via email	
Company Name	Contact (Individual Name)
Phone	Email
Authorized Agent (Requires Authorized Agent Form) <input type="checkbox"/> Check here to receive staff review comments via email	
Company Name	Contact (Individual Name)
Phone	Email
Campaign Contribution	
List below the names of local government officials, Garden City City Council, to whom campaign contributions were made, within two (2) years immediately preceding the filing of this application, which campaign contributions total \$250.00 or more or to whom gifts were made having a total value of \$250.00 or more.	
Elected Official's Name	Amount or Description of Gift

I hereby certify that I am the owner or authorized agent for the property included in this development application. The information provided in this application is accurate and complete. I understand that any permit issued based on false or misleading information provided in this or subsequent applications will be null and void and subject to penalty as provided by law and ordinance.

I understand that I will need to attend or be represented by a duly authorized agent at the meeting of the Board of Zoning Appeals and that my application cannot be approved unless I am represented.

Print Name

Signature

Date

This form and all required information must be completed in its entirety before it will be accepted by the City of Garden City. Failure to provide all required information may result in a delay in processing.

OFFICE USE ONLY		
Received By	Date Received	Case Number