

## **VARIANCE APPLICATION**

315 Stallings Road Stallings, NC 28104 704-821-8557 Fax 704-821-6841

Date Filed: Application Number: Fee Paid:

## \*Please reference the Fee Schedule for cost.

The Board of Adjustment (hereinafter "Board"), after having held a public hearing to consider the request for a variance to the Stallings Regulating Ordinance, will make their decision based on competent, material, and substantial evidence. Evidence must be provided that address the Standards of Review found in § 6.1-6 of the Stallings Development Ordinance.

Property Information	
Property Owner Name:	
Address or Location:	
Parcel ID #:	
Applicant Name (if different from P	coperty Owner):
Phone:	Email:
<u>Variance Request Description</u> Section(s) of Ordinance requesting relief from:	
certify that the forgoing statements are accunderstand that the Town of Stallings Ordi	fy that I am the property owner or truly represent the property owner(s). I urate and correct to the best of my understanding and knowledge. I nances and laws of the State of North Carolina regulating such work and any ation of the Zoning Ordinance will be grounds for revoking this permit and
Signature of Owner:	Date:
Signature of Applicant:	Date:
Signature of Zoning Official:	Date:



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## **Statement of Justification**

<b>Unnecessary hardship would result from the strict application of the ordinance</b> [Expense is NOT a valid hardship]:
The hardship results from conditions that are peculiar to the property such as location, size, or topography:
The hardship did not result from actions taken by the applicant or the property owner:
The requested variance is consistent with the spirit, purpose, and intent of the ordinance; such that public safety is secured, and substantial justice is achieved: