

**CITY OF JESUP
APPLICATION FOR VARIANCE**

DATE: _____ FEE: \$ _____

OWNER'S NAME _____ MAP: _____ PARCEL: _____
ADDRESS: _____

PHONE: _____

LOCATION OF PROPERTY: _____

TYPE OF REQUEST: _____

REASON FOR REQUEST: _____

**NAMES AND ADDRESSES OF OWNERS OR OCCUPIERS WITHIN 200 FEET
OF BUILDING ON SAME STREET**

	NAME	ADDRESS
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

**NAMES AND ADDRESSES OF OWNERS OR OCCUPIERS WITHIN 150 FEET
OF BUILDING ON DIFFERENT STREET**

	NAME	ADDRESS
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

DO YOU REQUEST A STENOGRAPHER? YES _____ NO _____

***APPLICANT SHALL BE RESPONSIBLE FOR THIS FEE IF A
STENOGRAPHER IS USED.**

SIGNATURE