

# APPLICATION FOR VARIANCE



**\$100.00 fee, plus \$2.00/notice sent to properties within 350 feet of property for which the variance is being sought.**

705 Parkway Ave., PO Box 159  
Eagle Lake, MN 56024  
(507)257-3218  
(507)257-3220 fax

**Applicant must pay all fees in advance of the public hearing.**

Applicant Name \_\_\_\_\_

Day Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Applicant's Address \_\_\_\_\_

Address Requesting Variance \_\_\_\_\_

Legal Description \_\_\_\_\_

Parcel ID \_\_\_\_\_

Current Zoning      A-1      R-1      R-2      R-3      R-4      B-1      L-1      H-1

**In detail, describe the proposed variance and the practical difficulty in making the variance necessary. Also, furnish a site plan on 8 1/2 x 11" paper showing size of lot, size of structure, and distance from lot lines.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature \_\_\_\_\_

\_\_\_\_\_ Date

**Office Use Only**-----

Date of Application Notification: \_\_\_\_\_

Date Fee Paid: \_\_\_\_\_

**Planning Commission Action**

- Recommended
- Recommended with conditions
- Not recommended
- Tabled

**City Council Action**

- Approved
- Approved with conditions
- Disapproved
- Tabled

\_\_\_\_\_  
City Administrator

\_\_\_\_\_  
Date