Variance Application

Town of Elba N3799 County Hwy T Columbus, WI 53925 (920) 728-0269 clerk@townofelba.wi.gov Office Use: Date Received _____ Fee Received _____ Check Number _____

Mail 1 copy and fee to: Wendy Stoeckler, Clerk N4006 County Road T Columbus, WI 53925

Application Fee: \$250 (Payable to: Town of Elba)

Variances may be granted if there are unusual circumstances that apply to a lot, structure, or use that do not apply to other properties or uses in the district; granting a variance would not adversely impact the purposes of the ordinance; strict application of the ordinance provisions would result in exceptional difficulties or hardship; and literal interpretation of the ordinance would leave the owner with no practical use of his land or buildings.

A variance may not be granted to increase the profitability of the property, because of personal inconvenience, because of construction errors, for personal economic gain, because of self created hardships, or if the present use of the property is nonconforming.

PLEASE COMPLETE ALL PAGES OF THIS APPLICATION. PRINT OR TYPE. The Town of Elba will not consider your application unless you complete and submit this application form. Personally identifiable information on this form will not be used for any other purpose, but it must be made available to requesters under Wisconsin's open records law [s.19.31-19.39, Wis. Stats.].

| Applicant: | Address: |
|-----------------------------------------------------|----------------------|
| | Email: |
| Joint Applicant: | Address: |
| Phone: | Email: |
| | |
| Owner of Site: | Address: |
| Dhamai | Emaile |
| Phone: | Email: |
| Opposite and Abutting Property Owners: | |
| Opposite and Abutting Property Owners: | |
| Opposite and Abutting Property Owners: 1 | NAMES AND ADDRESSES: |
| Opposite and Abutting Property Owners: 1 2 | NAMES AND ADDRESSES: |
| Opposite and Abutting Property Owners: 1. | NAMES AND ADDRESSES: |

1. NAMES AND ADDRESSES:

2.

3. DESCRIPTION OF THE SUBJECT SITE AND PROPOSED USES:

PIN Number: ______

Address (if applicable): ______

| Acreage: | Zoning (if known): |
|----------|--------------------|
| | |

Present use of land:

Intended use of land:

4. I HEREBY APPEAL FOR THE FOLLOWING VARIANCE:

REASON FOR VARIANCE:

5. ATTACHMENTS

Please attach a sketch of attached Rezoning plot plans including lot lines and distances from road, lots, etc.: Label Exhibit A

6. CERTIFICATE

I hereby certify that I am the owner and/or authorized agent of the property owner and that all the above statements and attachments submited hereto are true and correct to the best of my knowledge and belief and I hereby authorize members of the Town of Elba Zoning Board of Appeals to enter the above-described property for purposes of obtaining information pertinent to my variance request. I affirm that all work performed will be done in accordance with the Town of Elba Ordinances and with all other applicable laws and regulations.

| Applicant: | Date: |
|-------------------------------------------------|---------|
| Joint Applicant: | Date: |
| APPROVAL OR REFUSAL Town of Elba Board of Appea | als |
| Action/Decision: | |
| Stipulations: | |
| | |
| | |
| Signed: | |
| | |
| | _ Date: |

