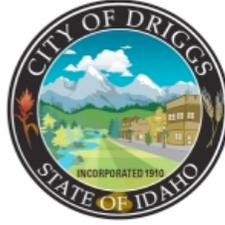


City of Driggs, Idaho
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Planning & Zoning

APPLICATION FOR VARIANCE

(Not a business license or building permit)

Owner/Applicant Name: _____

**** A statement authorizing a representative to apply for owner/applicant must accompany this form if applicable.**

Phone: _____ **Email:** _____

Address: _____

Property Address: _____

Reason for Variance: _____

Fee: \$ _____ (plus any additional cost incurred) must accompany this completed application.

Required Items to be Submitted

____ **Drawing:** A plan that shows the property that is under consideration, location of all improvements, and the specific information concerning the requested variance.

____ **Narrative:** A narrative statement demonstrating that the requested variance conforms to the following standards:

1. That special conditions and circumstances exist which are peculiar to the land, structure or building involved and which are not applicable to other lands, structures or buildings in the same district;
2. That a literal interpretation of the provisions of this Ordinance would deprive the applicant of rights commonly enjoyed by other properties in the same district under the terms of this Ordinance.
3. That special conditions and circumstances do not result from the actions of the applicant; and
4. That granting the variance requested will not confer on the applicant any special privilege that is denied by this Ordinance to other lands, structures or buildings in the same district.

The Planning Administration reserves the right to NOT officially accept this application until total review is accomplished and all required information submitted. The date of the public hearing will be established by the Administrator upon the acceptance of a complete application.

The P&Z Office Staff reserves the right to take photographs and/or videos of the property under consideration for a variance as deemed necessary as an addendum to the file.

I have read and understand the variance procedures and responsibilities which accompany this application.

Signature

Date

OFFICE USE ONLY

DATE COMPLETED APPLICATION RECEIVED: _____

RECEIVED BY: _____

PUBLIC HEARING DATE & TIME: