

CITY OF FORT PIERRE

VARIANCE REQUEST FORM

Applicant Information (Please type or print)

Property Owner Name

Mailing Address

City

State

Zip

Contact Person

Phone Number

Property Information

Set Back Variance Yes No Feet _____

Lot Size Variance Yes No Feet _____

Lot Size _____

Location of Variance (front, back, etc...)

Legal Description of Property

Address of Property

Reason for Variance

Signature

I hereby request the above described variance and also state that I am the true and correct owner of the above described property.

Signature

Date