WOLF POINT PLANNING DEPARTMENT

VARIANCE APPLICATION

201 4th Avenue South
Wolf Point, MT 59201
(406) 653.1852
wppublicworks@nemont.net

Application # _____ *(staff use only)* Submittal Date _____ *(staff use only)*

APPLICANT

Applicant Name _____ Applicant Address _____

Applicant Phone _____ Applicant Email _____

Property Owner *(if different)* _____ Owner's Email *(or phone #)* _____

PROPERTY *(request assistance from Planning Department if needed)*

Physical Address _____

Lot _____ Block _____ Section _____ Township _____ Range _____

Business Name *(if applicable)* _____ Subdivision Name *(if applicable)* _____

VARIANCE *(a narrative description is also required as part of your submittal)*

Existing Property Use _____ Existing Zoning District _____

Briefly describe the nature of this Variance request: _____

Applicant must demonstrate that the following are true: *(include details in narrative of proposed variance)*

- ☐ That special conditions exist peculiar to the land or building in question.
- ☐ That a literal interpretation of the ordinance would deprive the applicant of rights enjoyed by other property owners.
- ☐ That the special conditions do not result from previous actions of the applicant.
- ☐ That the requested variance is the minimum that will allow reasonable use of the land or buildings.

SUBMITTALS

☐ Application ☐ Narrative of Proposed Variance

☐ Review Fee ☐ Ownership Interest *(deed, title, etc.)*

APPLICANT AGREEMENT

Application fees are nonrefundable. Incomplete applications will be returned to the applicant. The issuance of an approval does not guarantee compliance with applicable building codes. The undersigned declares the above provided information is true and accurate, and that failure to provide accurate information may result in rejection of this application and/or possible revocation of the permit where wrongfully issued. Your signature below indicates that you understand these requirements and restrictions.

Applicant Signature _____ Date _____

WOLF POINT PLANNING DEPARTMENT

VARIANCE APPLICATION continued...

STAFF USE ONLY

Date Board Recommendation Received

Date of Notice in Newspaper

Date of Notice of Adjacent Property Owners

Date Filed Date Paid Amount Paid

If waiver or fee adjustment was given, note details below:

BOARD DECISION

Date of 1st Public Hearing 2nd

Board Decision: Denied Approved Approved with Conditions *(see below)*

If the Variance is approved with conditions, note all prescribed conditions below:

1.
2.
3.
4.
5.
6.
7.
8.
9.

If the Variance is denied, note the justification below:

Board Chairman Signature Date