

**APPLICATION TO REQUEST A HEARING
BEFORE THE
WEIMAR PLANNING & ZONING COMMISSION**

DATE OF APPLICATION _____ CASE # _____

APPLICANT _____

ADDRESS _____ PHONE NO. _____

LEGAL DESCRIPTION: LOT NUMBER _____ BLOCK NUMBER _____

ADDRESS OF PROPERTY _____

DESCRIPTION OF PROPERTY: _____

REASON FOR REQUESTING VARIANCE: _____

SIGNATURE OF APPLICANT _____

FEE \$25.00 DATE PAID: _____ RECEIPT #: _____

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FOR CITY USE ONLY
DATE AND TIME OF MEETING SCHEDULED _____

REQUEST FOR VARIANCE GRANTED/DENIED.
IF DENIED, REASON. _____