

VARIANCE REQUEST APPLICATION

City of Glenwood - 5 N. Vine St – (712) 527-4717

Application Fee \$350.00 Receipt _____ Date _____

Name of Owner/Applicant: _____ Phone: _____

Address of Owner/Applicant: _____

Property Address: _____ Email Address: _____

Property Owner Name & Address (if different from above): _____

Legal Description of Property: _____

Current Zoning: _____

Relevant Section(s) of City of Glenwood Land Development Ordinance: _____

Variance relating to Permitted Use: _____ Square footage: _____

Frontage: _____ Required yard: _____ Or Other: _____

Reason for variance request: _____

Attach supporting documents, if any, to this application.

Zoning Administrator/Designee

Date

Signature of Applicant

Board of Adjustment

Date of Public Hearing: _____ Approved _____ Disapproved _____

Comments

Board of Adjustment Chairperson

Date