



# TAPPAHANNOCK, VIRGINIA

## Application for Variance

P.O.Box 266 • 915 Church Lane  
Tappahannock, Virginia 22560  
(804) 443-3336 • Fax (804) 443-1051  
[www.tappahannock-va.gov](http://www.tappahannock-va.gov)

TO: THE BOARD OF ZONING APPEALS OF TAPPAHANNOCK, VIRGINIA

The undersigned applicant \_\_\_ (is) (are) the owner \_\_\_ of the following described property:

A PLAT OF THIS PROPERTY MUST BE ATTACHED HERETO AND MADE A PART OF THIS APPLICATION.

GIVE LOCATION BY REFERENCE TO NEAREST ROAD INTERSECTION.

DIMENSIONS OF SITE MUST BE GIVEN.

In \_\_\_\_\_ Magisterial District

The petitioner\_\_\_ request\_\_\_ that the said Board doth grant:

---

---

---

---

---

---

---

---

---

---

The applicant\_\_\_ make\_\_\_ this request because:

---

---

---

---

---

---

---

---

---

---

The person \_\_\_ and (his) (her) (their) address \_\_\_ owning and/or occupying adjacent property to the property sought to be affected (are) (is): (Give names of all owners adjacent, across the road or highway and facing the property and any owners across any railroad right-of-way from such property. In the event the property affected is situated at or within 100 feet of the intersection of any two or more roads or highways, at or within one hundred feet of the intersection of the rights-of-way of any two railroads, give names of property owners at all corners of any such intersection).

| Name  | Lot or tract | Mailing Address property: |
|-------|--------------|---------------------------|
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |
| _____ | _____        | _____                     |

I/we hereby depose and say that all of the above statements and the statements contained in any exhibits transmitted are true.

\_\_\_\_\_ 20\_\_\_\_\_

Applicant: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

Telephone number: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

My commissission expires: \_\_\_\_\_ 20 \_\_\_\_\_

Notary: \_\_\_\_\_