



Return To: 2445 S. Afton Rd.
Beloit, WI 53511
kdevault@townofbeloitwi.gov

Application Number _____

VARIANCE APPLICATION

Address of Property Involved: _____

Tax Parcel Number: _____

Petitioner: _____ Phone: _____

Address: _____

Property Owner: _____ Phone: _____

Address: _____

Present Zoning: _____

Application is being made for a variance from Section _____ of the Town of Beloit Zoning Code to permit the following: (Describe in detail the proposed construction, and why it does not comply with the ordinance.): _____

What special conditions exist which will cause practical difficulty or unnecessary hardship to provide a basis to grant the variance: _____

Attach the Following with Application:

- Site plan drawn to scale (1" = 100") showing the following
 - Boundaries and dimensions of the property (survey)
 - Location and dimensions of all existing and proposed buildings
 - Include all setbacks and offsets of all buildings
- Plans of the proposed building or addition

- Location of Well and Septic and Letter from the Rock County Health Department regarding status of the Well and Septic (if applicable)
- All Applicable Fees

Owner:

Signature

Date

Fees: Variance Application \$250.00 Total: \$ _____