



415 N. College Ave
Justin, Texas 76247
(940) 648-2541

City of Justin Variance Application

Reference #: _____

Variance Requestor Address

Telephone # Email

Lot(s) Blocks(s) Acreage

Requested Variance

Reason for Variance Request

Please attach all necessary supporting documents

Property Owner Information: (For multiple owners - submit info on each owner)

Name

Address

Telephone # Email

If the property owner(s) is(are) represented by an authorized agent, please complete the following:

Agent Name Agent's Address

Agent Title Telephone # Email

I, the undersigned, do hereby certify that I am the authorized Applicant/Owner/Agent of the property above described on the date of this application.

Signature of Applicant, Owner, or Authorized Agent

Date

<u>Planning Official</u>
Fee: \$ _____
_____ Date of BOA Hearing
_____ Signature of Planning Official

FOR OFFICE USE ONLY		
_____ Received By	_____ Date Received	_____ Date Approved
_____ Date Paid	<input type="checkbox"/> Cash	<input type="checkbox"/> CC
	<input type="checkbox"/> Check #(s):	_____