

VILLAGE OF CENTURIA VARIANCE APPLICATION

Receipt Number	Fee: \$300.00
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MAKE CHECKS (black ink) PAYABLE TO:
 Village of Centuria
 P.O. Box 280
 Centuria, WI 54824
715-646-2300, Mon- Fri, 7:00am-3:30pm

**COMPLETE ALL UNSHADED AREAS
 INCOMPLETE APPLICATIONS MAY BE RETURNED
 PLEASE PRINT – USE BLACK INK AND RETURN ORIGINAL FORM**

Property Address (Number & Street or Ave)

Applicant Business Name	
Applicant Name (s)	
Mailing Address	
City	State
Zip	
Phone Number	

Property Owner _____

Mailing Address _____

City _____ State _____ Zip _____

Email (optional) : _____

Phone Number: _____

LEGAL DESCRIPTION OF PROPERTY – SEE TAX BILL

Parcel # / Computer #	Lot #	CSM #
_____ ¼ _____ ¼, Sec _____ / T _____ N /R _____ W		
Size of Parcel X = SQ FT OR Acres	Zoning	

The applicant, as witnessed by the applicant's signature on this application hereby attests that the information contained therein is accurate and true. Any assistance by Village staff was at the applicant's request. I agree to permit Village officials charged with administering Village ordinances or other authorized person to have access to the above-described premises at any reasonable time for site review.

Sign Here: _____ Date: _____ Cash Check # _____

COMMENTS:				
Received by: _____		Date: _____		Fee _____
Date Received	Notifications Out	Publication Date	Hearing Date/Time	Board Meeting

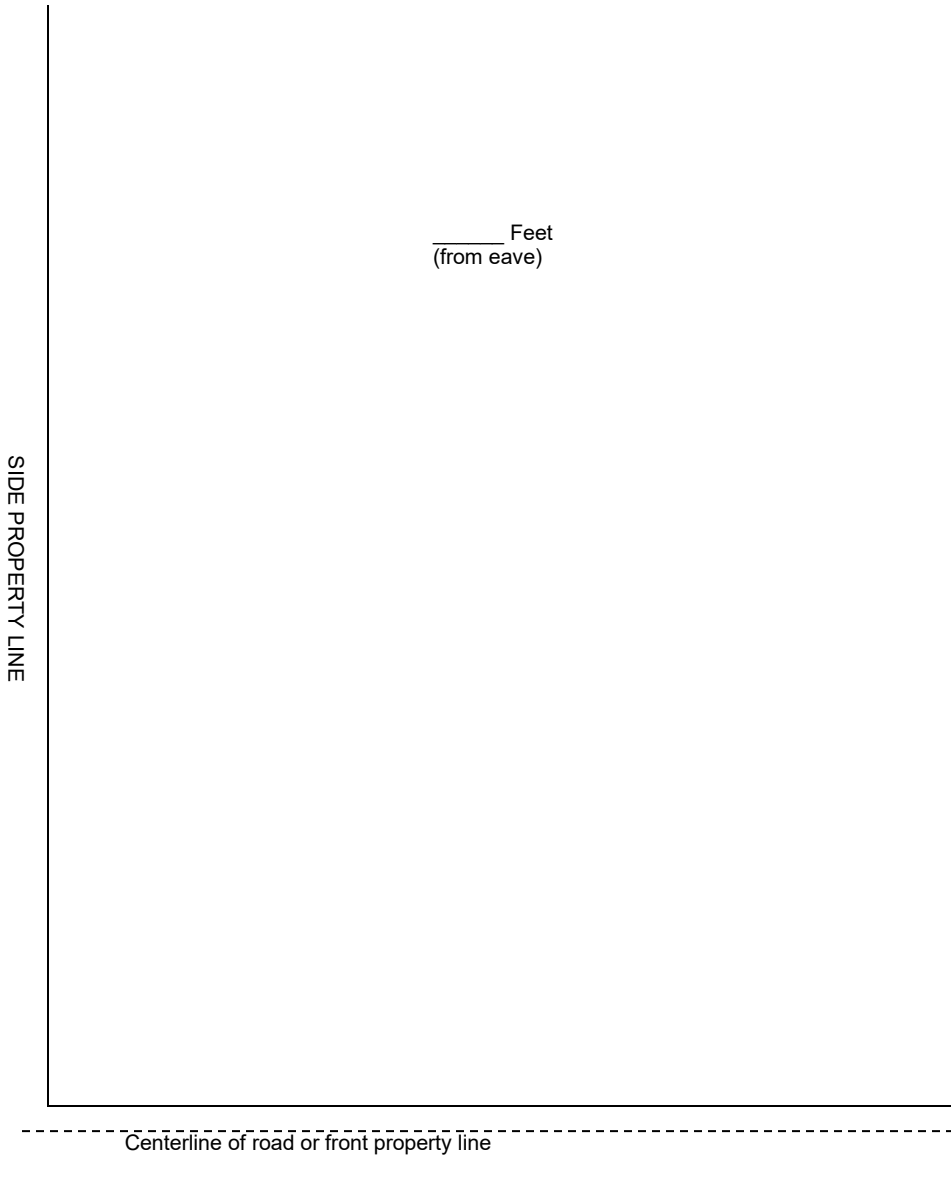
____ Feet
(from eave)

PERMIT REQUESTED FOR: Fill in appropriate line(s) (BE SPECIFIC)

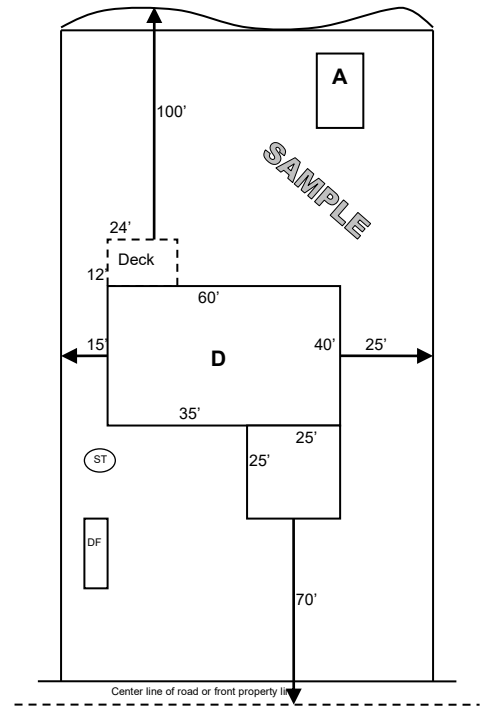
<input type="checkbox"/> New Dwelling	<input type="checkbox"/> Stick Built <input type="checkbox"/> Mobile Home <input type="checkbox"/> Modular <input type="checkbox"/> Seasonal Cabin	Walk out <input type="checkbox"/> Yes <input type="checkbox"/> No	Attached Garage <input type="checkbox"/> Yes <input type="checkbox"/> No	Size of Proposed Structure X = SF	Height	Number of Bedrooms	
<input type="checkbox"/> Addition to Dwelling	Deck, Garage, Bedrooms, etc...			Size of Proposed Structure X = SF	Height	Existing Bedrooms	Additional Bedrooms
<input type="checkbox"/> Accessory Building	Garage, Shed, etc...			Size of Proposed Structure X = SF	Height	STORAGE ONLY NO HUMAN HABITATION	
<input type="checkbox"/> Other (from eave)	Landscaping, Retaining wall, Stairway, Sign, Commercial, Tower, etc...			Size of Proposed Structure (from eave) X = SF	Height	Cost of Project \$	

SIDE PROPERTY LINE

LOT LAYOUT



- Show location of **ALL EXISTING STRUCTURES** in **SOLID LINES**
- Show dimensions, location and setbacks of **PROPOSED STRUCTURE** in **DOTTED LINES**
- Eave of structure must meet the minimum setbacks
- Indicate: "D" dwelling, "A" accessory building, "C" Commercial, "ST" septic tank, "DF" drainfield,



Describe your need for a variance.

Need for variance:

Please list all names and **complete mailing addresses** of all adjoining property owners within **300 feet** (including across the road). Provide property address if known.

Name		
Mailing Address		
Property Address		
Name		
Mailing Address		
Property Address		
Name		
Mailing Address		
Property Address		
Name		
Mailing Address		
Property Address		

NOTE: This application will not be processed until all information required has been provided. Once we receive your application, it takes at least 4-6 weeks to process your application. Commission members will receive information regarding your request before the scheduled hearing date. You will receive a notice by mail indicating when the hearing will take place. The Commission would prefer the landowner/representative be on site when they visit, however, it is not mandatory. The applicant or a representative should attend the hearing. On occasions, the Board may table requests for more information. If the Commission approves your project, it will be presented to the Village Board as such.