

TOWN OF CENTURY
APPLICATION FOR A VARIANCE

REQUEST #: _____

APPLICATION DATE: _____

The undersigned applicant requests that the Century Town Council consider this application for a Variance to the Town of Century Land Development Code.

1. NAME OF APPLICANT: _____

2. CURRENT ADDRESS: _____

3. TELEPHONE NUMBER: _____

4. ADDRESS OF PROPERTY: _____

5. PARCEL IDENTIFICATION NUMBER: _____

6. LEGAL DESCRIPTION OF PROPERTY: _____

7. PRESENT LAND USE ZONE: _____

8. PRESENT USE OF PROPERTY: _____

9. DESCRIBE REQUESTED VARIANCE: _____

10. DESCRIBE THE SPECIAL CONDITIONS AND CIRCUMSTANCES WHICH EXIST THAT ARE PECULIAR TO THE LAND, STRUCTURE OR BUILDING INVOLVED AND WHICH ARE NOT APPLICABLE TO OTHER LANDS, STRUCTURES OR BUILDINGS IN THE SAME DISTRICT: _____

11. EXPLAIN WHY LITERAL INTERPRETATION OF THESE REGULATIONS WOULD DEPRIVE THE APPLICANT OF RIGHTS COMMONLY ENJOYED BY OTHER PROPERTIES IN THE SAME DISTRICT UNDER THE REGULATIONS:

12. ARE THE SPECIAL CONDITIONS OR CIRCUMSTANCES WHICH EXIST A RESULT OF ACTIONS OF THE APPLICANT? YES _____ NO _____

13. EXPLAIN WHY THE GRANTING OF THIS VARIANCE WILL NOT GIVE THE APPLICANT SPECIAL PRIVILEGES THAT ARE SPECIFICALLY DENIED BY THESE REGULATIONS TO OTHER LANDS, STRUCTURES OR BUILDINGS IN THE SAME DISTRICT: _____

14. IDENTIFY THE PROVISION OF THE LAND DEVELOPMENT REGULATIONS THAT IS INVOLVED IN THIS APPEAL:

ARTICLE _____ SECTION _____ PAGE _____

OFFICIAL ACTION BY THE CENTURY TOWN COUNCIL:

DATE: _____

ACTION: APPROVED _____ DENIED _____

RETURN THIS COMPLETED FORM TO KRISTINA WOOD, DEPUTY TOWN CLERK, CENTURY TOWN HALL, 7995 N. CENTURY BOULEVARD, CENTURY, FLORIDA 32535. PHONE: (850) 256-3208.