

**TOWN OF FRANKLIN
BOARD OF APPEALS
VARIANCE APPLICATION**

VARIANCE REVIEW\$550
(fee is nonrefundable after application is submitted)

Also see Section 11 of the Town of Franklin Unified Development Ordinance for procedures.

Property owner(s) Name & Address _____

Phone _____ E-Mail _____

Petitioners Name & Address _____

Phone _____ E-Mail _____

Address or Location of Variance Request _____

Parcel(s) numbers _____

Property Zoning is now _____

Variance Requested _____

Justification for Variance request. Explain Hardship: _____

12 copies of scaleable site plan has been submitted _____

Office use only

Has pre-application consultation been completed? _____ If yes, when? _____

Date Variance Application was filed _____

Person certifying date of submittal _____

Application Number _____