

**REQUEST FOR CHANGE OR VARIANCE
TO THE CITY OF FAYETTE ZONING ORDINANCE**

APPLICANT NAME _____

DATE _____

Mailing Address _____

PHONE _____

Application Fee \$45.00

I hereby request:

- _____ Interpretation of the Zoning Ordinance or map
- _____ Special Exception to the Ordinance
- _____ Variance from the Ordinance requirements
- _____ Rezone from one district to another district
- _____ Approval of preliminary plat for a subdivision

Plat Area _____ Acres

Road R.O.W. _____ Acres

Net Area _____ Acres

TITLE OF PROPERTY OR SUBDIVISION

LEGAL DESCRIPTION AND ACREAGE (If Required) Otherwise, Street Address of the Property:

REMARKS: Explain the reason for your request for this application.

I certify that the above information as submitted herewith is, to the best of my knowledge,
true and accurate.

Signed _____
(Applicant)

Signed _____
(Zoning Administrator)