

**TOWN OF FRIENDSHIP  
VARIANCE APPLICATION**

Property Owner Name: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

Contact Number and Email: \_\_\_\_\_

Petitioner Name (if different from owner): \_\_\_\_\_

Petitioner Address: \_\_\_\_\_

Contact Number and Email: \_\_\_\_\_

Location of the Variance action:

Parcel Number: \_\_\_\_\_

Street/Fire Number and Name: \_\_\_\_\_

Legal Description (attach to application): \_\_\_\_\_

Parcel Area and Dimensions \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Current Use: \_\_\_\_\_

Nature and disposition of any prior petition for appeal, variance or special use:

\_\_\_\_\_  
\_\_\_\_\_

Description of all nonconforming structures & uses on this property:

\_\_\_\_\_  
\_\_\_\_\_

Variance Requested

a. Terms of Ordinance (Section No) \_\_\_\_\_

b. Variance Requested \_\_\_\_\_

\_\_\_\_\_

Address each of the following criteria for granting a variance as described in the application (attach additional pages if necessary):

1) Unnecessary hardship is present because...

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2) Compliance with the terms of the ordinance is prevented by unique features of this property:

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3) A variance will not be contrary to the public interest because...

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1. A check in the amount of \$250.00 payable to the Town of Friendship for costs incurred convening a public hearing. The Town of Friendship reserves the right to request reimbursement for additional costs over the amount of the initial hearing fee.

2. Attach a map or sketch of the property involved. Include property lines, existing & proposed driveways and roads, dimensions & locations of existing & proposed buildings, and location of sanitary septic system.

3. Names and addresses of neighbors closest to the property for which this variance is requested.

4. Additional information may be requested by the Board of Appeals. The decision of the Board of Appeals is final.

I hereby certify that all the above statements and attachments submitted hereto are true and correct to the best of my knowledge.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_