

VARIANCE APPLICATION FOR THE CITY OF LEEDS, ALABAMA
DEPARTMENT OF INSPECTION SERVICES- ZONING DIVISION
 1404 9TH STREET, LEEDS, AL 35094 P.205.699.2585
 leedsalabama.org

Part 1. Application	
Name of Applicant:	
Mailing Address:	
Telephone:	E-mail:
Signature:	

Part 2. Parcel Data		
Owner of Record:		
Owner Mailing Address:		
Site Address:		
Tax Parcel ID #	Existing Zoning:	Existing Land Use:

Part 3. Request
Section of Ordinance for which variance is requested:
Nature of Variance with reference to applicable zoning provision:

Part 4 Enclosures (Check all required enclosures with this application)
<input type="radio"/> Vicinity Map showing location of the property
<input type="radio"/> Plan drawn to scale and dimension ed, showing property boundaries and proposed Development Layout
<input type="radio"/> Copy of Deed as recorded in the Judge of Probate Office
<input type="radio"/> Application Fee \$120.00

NOTICE: The completed application and all required attachments must be filed at least 30 (thirty) days prior to the Leeds Zoning Board of Adjustments Public Hearing. A representative must be present at the hearing.

OFFICE USE ONLY	
Application Number:	Date Received:
Received By:	Scheduled Public Hearing Date: