APPLICATION TO THE

BOARD OF APPEALS

City of Darlington, Wisconsin

	Applicat	nt / Agent	Owner
Name			
Mailing Address			
Phone #			
Type of Request:	☐ Varianc	e from Code Req	uirements
Typo of Roquodi.	_	of Administrative	
PROPERTY INFOR			
Property Address:			
Toperty Address			
_egal Description: _			
Current Use:			
Proposed Use & Im	provements: _		
Proposed Use & Im	provements:	REQUESTED	
Proposed Use & Im DIMENSIONS: STREET YARD	provements: REQUIRED	REQUESTED ft	
Proposed Use & Im DIMENSIONS: STREET YARD LEFT SIDE YARD	provements: REQUIRED ft ft	REQUESTED ft	Is this a corner lot?YES NC
Proposed Use & Im DIMENSIONS: STREET YARD LEFT SIDE YARD RIGHT SIDE YARD	REQUIRED ft ft	REQUESTED ft ft	Is this a corner lot?YES NC
Proposed Use & Im DIMENSIONS: STREET YARD LEFT SIDE YARD RIGHT SIDE YARD REAR YARD	REQUIRED ft ft ft ft	REQUESTED ft ft ft	Is this a corner lot?YES NC Zoning District:
Proposed Use & Im DIMENSIONS: STREET YARD LEFT SIDE YARD RIGHT SIDE YARD REAR YARD AREA	REQUIRED ft ft	REQUESTED ft ft	Is this a corner lot?YES NC Zoning District:
Proposed Use & Im DIMENSIONS: STREET YARD LEFT SIDE YARD RIGHT SIDE YARD REAR YARD	REQUIRED ft ft ft ft	REQUESTED ft ft ft	Is this a corner lot?YESNC Zoning District: Code Reference (Section No.):

JUSTIFICATION FOR REQUEST

APPEAL OF AN ADMINISTRATIVE DECISION (provide a description of your appeal):
City Official(s) who made the decision you are app	pealing:
Decision of Official(s):	
Describe your appeal:	
VARIANCE (state below how your variance request confe	orms to the "Three Standards Test" described below)
1. <u>Unnecessary Hardship</u> is present because:	
2. The hardship is due to unique features of the p	roperty in that:
3. The variance will not be <i>contrary to the public in</i>	nterest because:
SIGNATURES The undersigned person(s) hereby give notice to to Darlington, Wisconsin, of an appeal and/or reques	
Appellant Signature:	Date:
Appellant Signature:	Date: