

Variance Application

31

ACCEPTED _____ DATE _____

DETERMINATION _____ DATE _____

FOR STAFF USE ONLY

Variance #: _____

Receipt #: _____

Property Address _____ Lot Number _____

Property Legal _____

Owner Information:

Name _____ Phone _____ Email _____

Mailing Address _____ City _____ Zip Code _____

Agent Information:

Name _____ Phone _____ Email _____

Mailing Address _____ City _____ Zip Code _____

TO BE COMPLETED BY OWNERS OF NEAREST PROPERTIES (Adjacent and across the street):

I CERTIFY THAT I HAVE REVIEWED THE APPLICANT'S PLANS FOR A VARIANCE. I AM AWARE THAT I MAY REGISTER MY OBJECTIONS EITHER IN A LETTER TO THE TOWN CLERK OR IN PERSON AT THE HEARING EXAMINER'S MEETING.

Owner's Signature _____ Phone: _____

Address _____

Owner's Signature _____ Phone: _____

Address _____

Owner's Signature _____ Phone: _____

Address _____

TO BE COMPLETED BY OWNER OR AGENT:

I CERTIFY UNDER PENALTY OF PERJURY THAT I AM THE OWNER OF THE ABOVE PROPERTY OR THE DULY AUTHORIZED AGENT OF THE OWNER(S) ACTING ON BEHALF OF THE OWNER(S) AND THAT ALL INFORMATION FURNISHED IN SUPPORT OF THIS APPLICATION IS TRUE AND CORRECT. I FURTHER CERTIFY THAT ALL APPLICABLE FEDERAL, STATE, COUNTY, AND TOWN OF HUNTS POINT LAWS AND REGULATIONS WILL BE MET.

SIGNATURE _____ DATE _____ OWNER AGENT

NOTE: All costs from actual staff/consultant time will be billed to applicant.



Town Hall, 3000 Hunts Point Road, Hunts Point, WA 98004-1121. Phone 425.455.834, FAX 425.454.4586. Permit intake and issuance hours are Tuesday and Thursday, 8am-12pm and 1pm-5pm. Building Services Department 425.455.1834.