



CITY OF HORSESHOE BAY
1 Community Drive
P.O. Box 7765
Horseshoe Bay, Tx 78657
830-598-9959

DEVELOPMENT SERVICES DEPARTMENT
DEVELOPMENT PROJECTS/PERMITS/INSPECTIONS
PLATTING/PLANNING & ZONING/BOARD OF
ADJUSTMENT
CODE ENFORCEMENT

Application for Variance from the Zoning Ordinance

Date: _____

Property Plat (Title/Lot #): _____

Owner's Name: _____

Mailing Address: _____

E Mail Address: _____

Phone Number(s): _____

Property Address: (if known) _____

Subdivision or Zone _____

Current Zoning Classification: _____

Current and/or anticipated use of property: _____

Describe zoning variance you are applying for: (Attach additional sheets if necessary)

Explain how your request addresses each of the following:

- (a) That there are special circumstances or conditions affecting the land involved such that the strict application of the provisions of this Ordinance would deprive the applicant of the reasonable use of the land.

(b) That the variance is necessary for the preservation and enjoyment of a substantial property right of the applicant.

(c) That the granting of the variance will not be detrimental to the public health, safety or welfare, or injurious to other property within the area.

(d) That the granting of the variance will not have the effect of preventing the orderly use of other land within the area in accordance with the provisions of this Ordinance.

(e) That the granting of the variance constitutes a minimal departure from this Ordinance.

(f) That the subject circumstances or conditions are not self-imposed, are not based solely on economic gain or loss, and do not generally affect most properties in the vicinity of the property. _____

Are all the checklist requirements being supplied? Yes No

If not, explain why:

(Attach additional sheets if necessary)

Certifications:

I hereby certify that I am the owner of the above described property for the purposes of this application. I agree to provide all necessary information concerning this submittal. I understand that any substantial modifications or additions to this submittal can mean the requirement of a revised submission. I certify that I have been informed and understand the regulations regarding this process as specified by City Ordinance.

Owner's Signature	Owner's Printed Name	Date
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Owner's Signature	Owner's Printed Name	Date
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I also hereby authorize the Applicant, Agent, and/or Engineer listed on this application to act on my behalf during the processing and presentation of this request. They shall be the principal contacts with the City in processing this application.

Owner's Signature	Owner's Printed Name	Date
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Owner's Signature	Owner's Printed Name	Date
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Applicant's Signature	Applicant's Printed Name	Date
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Agent/Engineer's Signature	Agent/Engineer's Printed Name	Date
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