Community Development Department
1700 N. 4th Ave. W.
Newton, IA 50208-1926
641-792-6622 FAX 641-792-0670
www.newtongov.org

Zoning Board of Adjustment
Application
Variance

Please fill out, print off and mail to above address.

Submitted Date_____

Fee: $100.00

Date Paid_____

Receipt #_____

File #V-_____

Name of Applicant	Mailing Address	Daytime Telephone
Name of Owner	Mailing Address	Daytime Telephone
Name of Agent	Mailing Address	Daytime Telephone

Location of premises affected by this variance:

Legal Description:

The Board is requested to grant a variance from Sec. _____ for the following reasons:

The following items must be submitted with application unless specified by the City Planner:

- ☐ 1) Site Plan
- ☐ 2) Building Plans
- ☐ 3) Petition signed by supporters of proposal [optional]
- ☐ 4) Application Fee

Signature of Applicant _____ Date _____

Revised 12-2006