



VARIANCE CHECKLIST

Staff	Applicant	
<input type="checkbox"/>	<input type="checkbox"/>	<u>Land Development Application</u> completed and signed by applicant and property-owner.
<input type="checkbox"/>	<input type="checkbox"/>	<u>Fees</u> All applicable filing fees.
<input type="checkbox"/>	<input type="checkbox"/>	Executed <u>Agreement to Pay</u> form
<input type="checkbox"/>	<input type="checkbox"/>	<u>Authorized Representative Form</u> if applicant is not the property-owner.
<input type="checkbox"/>	<input type="checkbox"/>	<u>Property Ownership Disclosure</u> . The disclosure of ownership must be dated within two (2) months of the application submittal.
<input type="checkbox"/>	<input type="checkbox"/>	<u>Certification of Title and Title Report</u> including Schedules A&B
<input type="checkbox"/>	<input type="checkbox"/>	Affidavit of Property Owner's List
<input type="checkbox"/>	<input type="checkbox"/>	<u>Public Notices</u> Self-Addressed and Stamped Envelopes required for each property on the list with the Town of Avon as the return address.
<input type="checkbox"/>	<input type="checkbox"/>	Utility Approval and Verification Form
<input type="checkbox"/>	<input type="checkbox"/>	Pre-Application Conference Summary
<input type="checkbox"/>	<input type="checkbox"/>	Written Statement describing the proposed variance request, including:
<input type="checkbox"/>	<input type="checkbox"/>	<ul style="list-style-type: none"> Response to provisions coin §2-8-702(b) of the UDC. Specific reasons for the variance request
<input type="checkbox"/>	<input type="checkbox"/>	Additional materials deemed necessary by Staff to determine the impact of the proposed variance will have on the health, safety and welfare of the City.

PROJECT INFO
Project Name: _____
Project Location: _____
Project Summary: _____