



Case No.: _____

403 S. Seguin Street - Converse, Texas 78109
Phone: 210-658-5356 Fax: 210-659-0964
www.conversetx.net

VARIANCE APPLICATION

Date of Request: _____

Record Owner of Property:

Owner Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone No.: _____ Email: _____

Agent*/Applicant:

Agent/Applicant Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone No.: _____ Email: _____

Property Information:

Property Address or General Location: _____
Property ID(s): _____ Current Zoning: _____
Legal Description: Lot(s): _____ Block(s): _____ Subdivision: _____
Lot Acreage: _____ Present Use of Property: _____

Description of Variance Request: (Cite hardship or difficulty as described in criteria for approval)

Variance from Code Section & Requirement: _____
Provide Description of Request: _____

Please answer the following questions in detail: (use additional pages if necessary)

- 1) What are the special circumstances or conditions affecting the land that warrant the request?

- 2) How may other surrounding properties be affected by the request?

- 3) What undue hardship may exist if the variance is not granted?

* An agent must submit a signed Letter of Authorization from the Record Owner when submitting this application.



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Criteria for Approval Recommendation

- 1) The variance requested arises from such condition which is unique to the property in question and which is not ordinarily shared by others in the same neighborhood or zoning district.
- 2) The particular physical surrounding, shape or topographical condition of the specific property involved would result in a practical difficulty or unnecessary hardship upon or for the owner or occupant, as distinguished from a mere inconvenience, if the provision of the regulations were literally enforced. **The hardship must be caused by the property itself and not created by the owner/applicant.**
- 3) The request for a variance is not based exclusively up a desire from the owner, occupant, or applicant for increased financial gain from the property, or to reduce an existing financial hardship.
- 4) The granting of the variances will not be materially detrimental or injurious to, or adversely affect the rights of owners or residents of surrounding properties.
- 5) The variance will not authorize the operation of a use other than those uses specifically authorized for the zoning district in which the subject property is located.
- 6) The proposed variance will not impair an adequate supply of light or air to adjacent property, substantially increase congestion in the public streets, increase danger of fire, endanger the public safety, substantially diminish or impair property values within the neighborhood, or otherwise be opposed to the general spirit and intent of the City's Code of Ordinance.

Submittal Check List

- Completed application and fee
- Letter of Authorization if applicant is not the Record Owner of the property
- Site Plan drawn to scale and no larger than 11" x 17" (see below for required details)
 - o Location of all property lines and their dimensions
 - o Location of all setbacks according to current zoning district
 - o Location of and dimensions of all existing and proposed buildings/structures, to include distances from property lines
 - o Location of all adjacent streets, alleys, and access easements, to include known utility easements

(Additional information may be deemed necessary by staff for processing and reviewing of this request.)

I hereby certify that I am the agent/record owner of the property. I further certify that the information provided on this application is true and correct.*

I understand that this request must go forward to the Planning & Zoning Commission with further review with City Council before a final decision will be presented to me.

Record Owner Signature: _____

Date: _____

Agent*/Applicant Signature (if not owner): _____

Date: _____

Printed Name of Applicant: _____

For Office Use Only	
Date Received: _____	Fee Received By: _____
Amount: \$ _____ Cash: _____ Check: _____ Credit Card: _____ Receipt No.: _____	

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