

Variance Application Submission Checklist

Residential Dimensional Variance



City of Madison, Mississippi

Submission Deadline

All applications must be submitted **no later than the second Monday of each month**. Incomplete applications will not be accepted.

Applicant Information

- Applicant Name: _____
 - Property Address: _____
 - Parcel Number: _____
 - Variance Request: _____
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Required Submittal Items (*Staff Initial Each*)

Item	Provided Staff Initial
Completed Variance Application Form (signed) <input type="checkbox"/>	_____
Site Plan (with setbacks, dimensions, structures) <input type="checkbox"/>	_____
Letters from All Bounding Property Owners <input type="checkbox"/>	_____
HOA Letter (if applicable) <input type="checkbox"/>	_____
Deed Restriction (Accessory Buildings Only) <input type="checkbox"/>	_____
Packet includes all Items and Collated <input type="checkbox"/>	_____
Pay the Fee of \$100 <input type="checkbox"/>	_____

Additional Information

- All materials must be submitted **together at one time**.
 - Additional information may be required during staff review.
 - Applications will be scheduled once deemed complete.
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Questions

Kianca Guyton, Director of Planning, City Hall: **601.856.7116**

Bounding Property Owner Approval and Public Hearing Acknowledgment (Sample Letter)

All adjacent property owners sharing a boundary with the subject property must complete and sign below.

Variance Request Address: _____

Property Owner Name (Print)

Approval, Acknowledgment, and Variance Criteria Statement

I, the undersigned, am an owner of property adjacent to the subject property listed above.

I hereby **approve** of the requested variance and acknowledge that I have been informed of the nature and scope of the request.

I further acknowledge that this request will be considered at a public hearing before the Planning and Zoning Commission. I understand that I can attend this public meeting and speak for or against this application.

In granting my approval, I acknowledge that the requested variance:

- Will not adversely affect the public health, safety, or general welfare;
- Will not alter the essential character of the surrounding area;
- Is based on conditions specific to the property and does not constitute a special privilege.

This approval is given voluntarily and with full understanding of the request as presented.

Name of Bounding Property Owner

Signature

Date