Squamish Board of Variance



Application Form

| Contact Information | | | | |
|---|-------------------|------------------------------|-----------------------|--|
| Name of Applicant (Contact Person): | | me of Representative (if app | licable): | |
| Phone: | | Phone: | | |
| Email: | | Email: | | |
| Mailing Address: | | Mailing Address: | | |
| Property Information | | | | |
| Civic Address: | | | | |
| Legal Description (must match title): | | | | |
| PID: | Zonir | ng: | | |
| Describe Proposal: | | | | |
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| Danisa da Mariana | | | | |
| Requested Variances | De codition d | D | D:(t | |
| Bylaw Section & Requirement Example (Section 6.6 – Minimum Setbacks) | Permitted (7.62m) | Proposed (7.04m) | Difference (0.58m) | |
| Section 0.0 William Setbacks) | | | | |
| | | | | |

Squamish Board of Variance Appeal



Application Form

| Hardship & Justification | | | | |
|--|--|--|--|--|
| (attach separate sheet if necessary) | | | | |
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| Is this variance required to legalize a bui | ilding or structure that has already been constructed? | | | |
| Was a valid Building Permit issued prior | to construction? If yes, BP#: | | | |
| | | | | |
| Application F | ee: \$500.00 (non-refundable) | | | |
| PLEASE PROVIDE THE FOLLOWING WITH YOUR | APPLICATION (no less than 21 days prior to the hearing): | | | |
| | | | | |
| Title Search – with copies of any registered of Drawings: | covenants, permits, or land use contracts | | | |
| | by a BC Land Surveyor showing any existing buildings and proposed | | | |
| | ines, OR, where no buildings exist, provide a site plan showing proposed | | | |
| building footprint and setbacks in rFloor Plan – showing intended use | elation to property lines. | | | |
| Elevations – preliminary elevations | showing building height with height calculations | | | |
| Electronic copies of all site plans, fl Additional information, i.e.: | oor plans, elevations & photographs being submitted in hard copy. | | | |
| Additional information, i.e Photographs | | | | |
| Letters of support | | | | |
| I consent to board members and/or staff enter | ing onto the property for the purposes of verifying information | | | |
| in this application. | | | | |
| SIGNED BY ALL OWNERS SHOWN ON TITLE: | | | | |
| | | | | |
| Signature of Registered Owner(s) | Signature of Agent/Applicant | | | |
| | · · · | | | |
| Signature of Registered Owner(s) | | | | |
| AND ALTHE OF REDISTRIED CIMPRIST | | | | |

Information in this application is collected pursuant to the Local Government Act for the purpose of administering your variance request, will form part of the public record and is subject to the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection and use of information, please contact the Information & Privacy Coordinator, Municipal Hall.