



City of Bristol, Virginia - Planning Department  
300 Lee Street  
Bristol, VA 24201  
Phone: 276-645-7470  
Fax: 276-821-6099

### Zoning Variance Application (\$400.00)

Applicant Name

Mailing Address

Phone

Email

Subject Property Parcel ID No.

Street Address of the Subject Property

Will property owner have authorized Agent acting on his/her behalf?  Yes  No  
If yes, please provide accompanying Agent Authorization letter and Agent's Name and Phone No.

Agent Name

Phone Number

**Variance Requested:**

Please provide the specific regulation for (?) which the variance is being requested: *(Example: A reduction of "x" feet in the required front setback for a garage.)*

City Code Section: \_\_\_\_\_

Virginia Code § 15.2-2309(2) establishes that the Board of Zoning Appeals may approve a variance if after consideration of the facts and evidence the Board finds the following:

1. The strict application of the Ordinance would produce undue hardship relating to the property, and
2. That the hardship is not generally shared by other properties in the same zoning district and the same vicinity, and
3. That the authorization of the variance will not be of substantial detriment to adjacent property and that the character of the district will not be changed by the granting of the variance.

Please describe how your request will meet the criteria above and attach any pertinent information (photographs, plans, maps, diagrams) needed to fully explain your request.

I understand that the applicant is also responsible for paying for the costs of advertisement and mailing notices to all adjoining property owners as required by the Code of Virginia.

Applicant Signature

Date



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### Agent Authorization Form

Property Description:

Parcel Tax ID: \_\_\_\_\_

STREET ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

Property Owner: \_\_\_\_\_

Property Owner: \_\_\_\_\_

The undersigned, registered property owners of the above noted property, do hereby authorize \_\_\_\_\_, of \_\_\_\_\_

(Contractor / Agent)

(Name of firm)

to act on my behalf and take all actions necessary for the processing, issuance and acceptance of this permit or certification and any and all standard and special conditions attached.

Property Owner's Address and Telephone: (if different than property above):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We hereby certify the above information submitted in this application is true and accurate to the best of our knowledge.

Authorized Signature \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Date \_\_\_\_\_