

VARIANCE APPLICATION



Washington County, Tennessee
Zoning Office
P.O. Box 219
Jonesborough, TN 37659
Zoning@WashingtonCountyTN.org

APPLICANT

Name _____ Phone _____

Email _____

PROPERTY OWNER(S) Same as Applicant

Name _____ Phone _____

Email _____

Mailing Address _____ City _____ State _____ Zip Code _____

SITE INFORMATION

Address _____ City _____ State _____ Zip Code _____

Civil District _____ Tax Map _____ Group _____ Parcel(s) _____

Zoning _____ Existing Use _____

VARIANCE DETAILS

Section(s) _____ Type of Requirement(s) _____

Requirement _____ Requested Change _____

REASON FOR REQUEST (Attach additional documentation, if needed)

*By signing below, I certify that all information provided is true and correct. I agree to attend all meetings that concern this request. All applications require Board of Zoning Appeals consideration and must be submitted by the 15th of the month prior to the meeting date. I recognize that a **Variance Application Fee of \$305.00** must be submitted with this application. A site plan, visualizing the requested actions, must be prepared and submitted with this application. This application is not considered complete until the fee has been paid and a site plan has been submitted.*

I agree to post a sign on the requested site, viewable from the nearest public right-of-way, no less than ten (10) days before the meeting date, and maintain the sign until all meetings are concluded. Upon completion of all meetings, the sign will be returned. Should the sign go missing, I will notify the Zoning Office immediately to obtain a replacement. I understand that the completion of this application does not guarantee receipt of any requested relief.

APPLICANT SIGNATURE _____ **DATE** _____

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STAFF USE ONLY

FILE # _____

MEETING INFORMATION

Washington County, Tennessee Board of Zoning Appeals (WCBZA)

Historic Courthouse, 100 E Main Street, Jonesborough, Tennessee 37659 (1st Floor Conference Room)

Date _____ Time 9:00 AM

STAFF SIGNATURE _____ DATE RECEIVED _____