

APPLICATION FOR VARIANCE FROM THE REQUIREMENTS
OF THE ZONING REGULATIONS

CITY OF ROBINSON PLANNING COMMISSION

Applicant _____ Phone _____
Address of Applicant _____
Owner _____ Address _____
Premises affected Lot No. _____ In _____ Addition.
Street Address : _____
Other Description _____

Detailed Statement of Variance Applied For and Reasons Necessitating Variances:

The above information and attached exhibits, to my knowledge and belief, are true and correct.

Applicant

State of Illinois)

) SS :

County of Crawford)

Subscribed and sworn to me before this _____ day of _____, 20 _____

Notary Public

My commission expires _____, 20 _____

Received by Planning Commission _____, 20 _____ \$ _____

Hearing by Planning Commission _____, 20 _____

Action : (GRANTED / DENIED), _____, 20 _____

Hearing by City Council _____, 20 _____

Action : (GRANTED / DENIED), _____, 20 _____