



**CITY OF STAFFORD, TEXAS**

**APPLICATION FOR VARIANCE**

APPLICANT(S) NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE NUMBER(S): \_\_\_\_\_

EMAIL: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

LEGAL DESCRIPTION: \_\_\_\_\_

REPRESENTATIVE'S NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

POSITION: \_\_\_\_\_

PERTINENT SECTIONS OF  
CODE OF ORDINANCES: \_\_\_\_\_

SPECIFIC VARIANCE REQUESTED: \_\_\_\_\_

DESCRIPTION OF WHY REGULATIONS SHOULD NOT BE APPLIED;  
REASONS FOR VARIANCE AND HOW STANDARDS WILL BE MET:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DESCRIPTION OF ACTIONS TAKEN IN ATTEMPT TO COMPLY WITH REGULATIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- ATTACHMENTS: 1. TITLE POLICY  
2. PURCHASE CONTRACT  
3. APPLICATION FEE

PRINTED NAME OF APPLICANT: \_\_\_\_\_  
SIGNATURE OF APPLICANT: \_\_\_\_\_  
DATE SIGNED: \_\_\_\_\_

\_\_\_\_\_  
CITY ENGINEER'S RECOMMENDATION:  
APPROVE      DENY      APPROVE WITH FOLLOWING CONDITIONS:

\_\_\_\_\_  
\_\_\_\_\_  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ZONING ADMINISTRATOR RECOMMENDATION:  
APPROVE      DENY      APPROVE WITH FOLLOWING CONDITIONS:

\_\_\_\_\_  
\_\_\_\_\_  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CITY ATTORNEY RECOMMENDATION:  
APPROVE      DENY      APPROVE WITH FOLLOWING CONDITIONS:

\_\_\_\_\_  
\_\_\_\_\_  
SIGNANTURE: \_\_\_\_\_ DATE: \_\_\_\_\_