



City of \_\_\_\_\_  
**HAWTHORNE**  
Florida

6700 SE 221<sup>st</sup> Street  
PO Box 1270  
Hawthorne, FL 32640  
Telephone (352) 481-2432  
Fax (352) 481-2437

## CITY OF HAWTHORNE

### VARIANCE APPLICATION

Name of Applicant(s) \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Name of Applicant's Agent (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Please complete the following:

Parcel Number of property: \_\_\_\_\_

Legal Description of property:

Total Acreage of land to be considered under this amendment: \_\_\_\_\_

Present Use: \_\_\_\_\_  
(commercial, industrial, residential, agricultural, vacant, etc.)

Present Zoning \_\_\_\_\_ Present Future Land Use: \_\_\_\_\_

A variance is requested in conformity with the powers vested in the Board of Adjustment by the Land Development Regulations to: \_\_\_\_\_

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

Please provide any additional information that would aid in the processing of your application:

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

A previous variance application:

\_\_\_\_\_ was made with respect to these premises. Application No. \_\_\_\_\_

\_\_\_\_\_ was not made with respect to these premises.

I hereby certify that all of the above statements and statements contained in any papers or plans submitted herewith are true and accurate to the best of my knowledge and belief.

If title holder(s) are represented by an agent, a letter of designation from the title holder(s) addressed to the City Manager must be attached.

\_\_\_\_\_  
Applicant/Agent Name

\_\_\_\_\_  
Applicant/Agent Signature

\_\_\_\_\_  
Date

**For Office Use Only:**

Date Filed \_\_\_\_\_

Fee amount \_\_\_\_\_ Check No. \_\_\_\_\_

Date of Hearing \_\_\_\_\_

Date Notice Published \_\_\_\_\_ Newspaper \_\_\_\_\_

Board Adjustment Decision \_\_\_\_\_