



SWINOMISH INDIAN TRIBAL COMMUNITY
OFFICE OF PLANNING & COMMUNITY DEVELOPMENT
 11430 Moorage Way • La Conner, WA 98257
 Phone 360-466-7280 FAX 360-466-1615

VARIANCE REQUEST APPLICATION

APPLICATION NO. _____

Applicants shall be charged a **\$200.00** non-fundable fee at the time of application. All Variance request applications must be accompanied by three (3) copies of a scaled site plan showing lot lines, existing conditions, and proposed changes.

SECTION I - GENERAL INFORMATION

Fill out completely. Attach legal descriptions if necessary. If this application is for a zoning variance please complete sections I and II. If this application is for a sign variance please complete sections I and III. If this application is for a Shorelines and Sensitive Areas variance please complete sections I and IV. Sign on last page.

APPLICANT		
Name: _____		
Mailing Address: _____		
Site Address (if different): _____		
Government Lot # _____ <small>(Trust Land Only)</small>	Parcel # _____	Assessor's Tax Account # _____
Home #: ()	Work #: ()	Fax #: ()
LEGAL DESCRIPTION OF AFFECTED PROPERTY (INCLUDE ATTACHMENTS IF NECESSARY):		
SHORT DESCRIPTION OF PROPOSED VARIANCE:		

SECTION II - ZONING VARIANCE

Complete this section for zoning variance only. Also complete Section I.

<p>What is the current zoning designation including setback requirements:</p>
<p>Describe the current use of the property (Residential, Commercial, Forestry etc):</p>
<p>Lot dimensions:</p>
<p>Describe the current parking situation and how the proposed variance may affect parking:</p>
<p>EXISTING FLOOR SPACE _____SQ FT PROPOSED FLOOR SPACE _____SQ FT TOTAL FLOOR SPACE _____SQ FT</p>
<p>Describe the reason(s) supporting your request for a variance: (This should include any hardship encountered with a literal enforcement of Tribal codes and regulations).</p>
<p>List all other permits required or obtained affecting this property:</p>
<p>Identify any documentation supporting this application (photos, letters, etc. – attach as appropriate):</p>

SECTION III - SIGN VARIANCE

Complete this section for sign variance only. Also complete Section I.

What is the current zoning designation including setback and sign requirements:					
Describe the current use of the property (Residential, Commercial, Forestry etc):					
Lot Dimensions:					
What is the non-conforming aspect of your sign: (circle all that apply)					
<table border="0"><tr><td style="text-align: center;">AREA</td><td style="text-align: center;">HEIGHT</td><td style="text-align: center;">PLACEMENT</td><td style="text-align: center;">SIZE</td><td style="text-align: center;">TYPE</td></tr></table>	AREA	HEIGHT	PLACEMENT	SIZE	TYPE
AREA	HEIGHT	PLACEMENT	SIZE	TYPE	
Describe any unique conditions:					
Describe any public detriment:					
Describe your access and maintenance requirements:					
List all other permits required or obtained affecting this property:					
Identify any documentation supporting this application (photos, letters, etc. – attach as appropriate):					

SECTION IV - SHORELINES & SENSITIVE AREAS VARIANCE

Complete for Shoreline & Sensitive Areas variance only. Also complete Section I.

<p>Describe the variance you are seeking and the applicable Shoreline Class or Sensitive Area:</p>
<p>Describe the current use of the property (Residential, Commercial, Forestry etc):</p>
<p>Describe any circumstances that you feel constitute an unreasonable hardship caused by application of the ordinance, and why you believe the variance is necessary to avoid any such unreasonable hardship:</p>
<p>Does the application of the ordinance cause a loss of access to your property or a loss of nearly all economically beneficial use of the property?</p>
<p>Describe any special consideration the variance would give to conservation measures that preserve or enhance anadromous fish and their habitat:</p>
<p>Identify any documentation supporting this application (photos, letters, etc. – attach as appropriate):</p>

SIGNATURE

<p>Application is hereby made for a VARIANCE to authorize the activities described herein. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief, such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities. I hereby grant to the officials of the Swinomish Indian Tribal Community the right to enter the above-described location to inspect the proposed or completed work.</p>
<p>_____ Date: _____</p> <p>Signature of Applicant or Designated Agent</p>