

City of Glenwood, Arkansas
Board of Zoning Adjustment
Application For Variance

Applicant: _____

Phone Number: _____

Project Location:

Property Address:

Legal Description:

Description of Variance Being Sought (Attach any necessary drawings):

Proposed Use:

Existing Zoning Classification: _____

Requested Change: _____

Plat of Property is attached: Yes No

Vicinity Map is attached: Yes No

The undersigned designates the following agent or attorney to represent the applicant at all hearings: _____

This _____ day of _____, 20_____.

Applicant's Signature

Address: _____