

APPLICATION FOR ONSITE SEWER VARIANCE

Owner:	
Name:	Phone Number:
Project address:	
Mailing address (if different than above):	
Township, Section, and Range:	
Legal Description of Property:	
AFFECTED DRODEDTY.	
AFFECTED PROPERTY: (Attach additional sheet if more than one	e property is affected):
Name:	
Address:	
Telephone Number:	
	nd the design of the proposed sewage treatment system. Include lot and limiting factors (i.e. slopes, wetlands, trees, and vegetation).
VARIANCE(S) REQUESTED:	
Please list the variance(s) requested:	
	

COMMENTS EXPLAINING SEPTIC VARIANCE CRITERIA

Applicant Name:		
1. Variances shall only be permitted when they are in harmony with the general purposes and intent of the Onsite Sewage Treatment System Rules and Regulations and where there are particular difficulties or "hardship" when carrying out the strict letter of the Rules and Regulations. "Hardship" as used in connection with the granting of a variance means the property cannot be put to reasonable use if used under the conditions of this Ordinance. (Economic considerations alone shall not constitute a hardship).		
2. The plight of the owner is due to circumstances unique conditions affecting the property resulting of loother circumstances which the landowners have no coessential character of the locality or have a significant and Please explain:	ot size, layout, shape, topography, soil conditions or ntrol over. The variance, if granted, will not alter the	
3. The variance, if granted, will not have a significant a offensive to persons residing or working in the area admaterially detrimental to the public welfare or damaging the property or the applicant, and that granting of the Please explain:	jacent to the property of the applicant and will not be ng to property or improvements in the area adjacent to	
I understand and agree that the septic system to be insto meet all of the requirements of the Rules and Regula sewage treatment systems due to unique site condition last as long as a system that is designed and installed to District/Unit harmless from any and all actions that ma	ns. I understand and accept that the system may not o meet all requirements. I agree to hold the Health	
Property Owner - Signature	Date	
Property Owner - Printed Name		