



CITY OF PINE BLUFF, ARKANSAS

Board of Zoning Adjustment Variance

Application / Petition

Please fill out this form completely, supplying all necessary information and documentation to support your request.
Your application will not be placed on the Board of Zoning Adjustment agenda until this information is provided.

Address/Location of Property: _____

Legal Description: _____

Size of Property (acres): _____ Current Zoning: _____ Ward: _____

Variance Requested: _____

Reason for Request: _____

Applicant / Agent

Name: _____

Address: _____

Telephone: _____

Email: _____

Fax: _____

Property Owner (Must be filled out if different)

Name: _____

Address: _____

Telephone: _____

Email: _____

Fax: _____

Additional information/comments: _____

Applicant / Business Owner Signature

Date

PROPERTY OWNER(S) / AUTHORIZED AGENT CERTIFICATION: I (We), the undersigned, hereby certify under penalty of perjury that I (we) are the owner(s) of the property that is the subject of this application and I (we) have read this application and consent to its filing. *(If signed by the authorized agent, a letter from each property owner must be provided indicating that the agent is authorized to act on his/her behalf.)*

Signature _____ Date _____

Signature _____ Date _____

Printed Name _____
 Owner _____ or Authorized Agent _____
(check one)

Printed Name _____
 Owner _____ or Authorized Agent _____
(check one)

Submission Deadline: _____ Expected Planning Commission Meeting Date: _____

• SEE REVERSE SIDE FOR SUBMISSION REQUIREMENTS •

It is our intention to assist you in making your project a success in a timely manner. Please call if you have any questions or need assistance from the City of Pine Bluff Inspection & Zoning Department, 200 E. 8th Avenue, Pine Bluff, AR 71611 tel: (870)730-2020 fax: (870) 730-2170.

