



Board of Variance Application

Folder/Permit No.
BOVO

1903 Mount Newton Cross Road Saanichton BC V8M 2A9 250 544-4217 www.centrialsaanich.ca

This collection of personal information is authorized under the *Local Government Act, Community Charter and Freedom of Information and Protection Privacy Act*. The information will be used to access an appeal to the District of Central Saanich's Board of Variance. Questions can be directed to the District's Information and Privacy Officer at 250-652-4444 or municipal.hall@csaanich.ca.

Project Info

Address					Zoning
Lot	Section	Range	Plan	PID	Folio

Owner

Name(s)/Company			Contact (if applicable)		
Address		City		Postal Code	
Telephone	Cell	email		receive email notices <input type="checkbox"/>	

If Applicable -

I, the owner of the above property, hereby authorize and appoint _____ as my agent for this application.

Applicant

Name/Company		Contact		Business Licence No. & Municipality	
Address		City		Postal Code	
Telephone	Cell	email		receive email notices <input type="checkbox"/>	

The undersigned owner/authorized agent of the owner makes application for the permit specified herein, and declares that the information submitted in support of the application is true and correct in all respects.

Owner's Signature – Required	Date	Authorized Agent Signature – If Applicable	Date
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REQUIRED INFORMATION/PLANS

- Current Certificate of Title
- Detailed letter (addressed to the Board of Variance): clearly explaining requested variance and hardship
- Site plan: BCLS survey, with all structures and setbacks.
- Building floor plans and elevations
- Calculations: for site area, coverage, bldg. area, floor space ratio, bldg. height, grade, and parking stalls.

REQUIRED FEES

- \$200 application fee.
- \$ 50 refundable sign deposit (separate check please)

Sign must be prominently displayed for **seven days** prior to the meeting.

Project Information

Summary of Variance Request _____

Summary of Hardship _____
