



CASTLEGAR

BOARD OF VARIANCE APPLICATION

APPLICATION NO. BOV-_____

THE INFORMATION REQUESTED IN THIS FORM IS REQUIRED TO EXPEDITE THE APPLICATION AND ASSIST THE STAFF IN PREPARING A RECOMMENDATION. PERSONAL INFORMATION CONTAINED ON THIS FORM IS COLLECTED UNDER THE **FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT** AND WILL BE USED ONLY FOR THE PURPOSE OF PROCESSING YOUR APPLICATION.

1. Appellant's Name: _____

2. Appellant's Mailing Address: _____

3. Appellant's Phone Number: Home: _____ Work: _____ Email _____

4. Civic Address of Property: _____

5. Legal Description of Property: _____

6. Folio Number: _____

7. Are you the registered owner? Yes: _____ No: _____
(If not, attach letter of consent from the registered owner.)

8. Has this matter been processed through the Building Department? Yes: _____ No: _____

9. Date of refusal? _____

Was refusal in writing? Yes: _____ No: _____
(If Yes, please attach copy.)

10. Briefly outline decision against which appeal is being made: _____

11. Outline grounds of appeal (hardship, interpretation, rural or industrial servicing, non-conformance, destruction, etc.)

CERTIFIED CORRECT THIS _____ DAY OF _____ 20__.

Appellant

NOTES:

1. Plans or any further supporting data must be attached.
2. Applications must be submitted to the Secretary of the Board of Variance (Director of Corporate Services), Castlegar City Hall, along with the \$100. application fee. A refund shall be granted, without interest, if the application does not proceed to the Board of Variance hearing. No refund shall be granted following the hearing of an application by the Board of Variance.
3. You will be advised by the Development Services Clerk, of the date, time and place of the hearing.