

APPLICATION FOR A VARIANCE

Town of Topsail Beach
820 S Anderson Blvd
Topsail Beach, NC 28445



Name/Agent_____

Mailing Address_____

City_____ State _____ Zip_____

Contact Number_____

E-mail address_____

Address of Property for variance _____



Reason for requesting a Variance:

Please Qualify the Following Findings of Facts:

(Use Separate sheets if needed)

1. That special conditions and circumstances exist which are peculiar to the land, structure, or building involved which are not applicable to other land, structures or buildings in the same district.
2. That literal interpretation of the provisions of this ordinance would preclude the applicant of rights commonly enjoyed by other properties in the same district under the terms of this ordinance.
3. That the special conditions and circumstances do not result from the actions of the applicant.
4. That granting the variance requested will not confer on the applicant any special privilege that is denied by this ordinance to other land, structures or buildings in the same district.