



W B L C D

**FORM #7: REQUEST FOR VARIANCE as defined in Ordinance No. 5, Part VII, Section 7.01, Subdivision 1.**

Applications considered at board meetings, held on the 3rd Tuesday of each month.

Submit this application minimum of one month before next meeting to White Bear Lake Conservation District  
4701 Highway 61, White Bear Lake, MN 55110

Variance Fee \$ _____	Paid _____/_____/_____
(Please check one)	
<input type="checkbox"/> Permanent variance	<input type="checkbox"/> Temporary variance (From _____ to _____)

**1. Applicant information:**

Organization/Applicant Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone (w) \_\_\_\_\_

Address: \_\_\_\_\_ (h) \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**2. List all other permits, licenses, and approvals required** which have been obtained or requested from other governmental units having jurisdiction. \_\_\_\_\_

**PLEASE ATTACH THE FOLLOWING INFORMATION:**

- Description and location of property or lake area for which the variance is sought** . Include a map or plat of the site for which the variance is sought, a map or plat of abutting or other affected sites showing any existing docks, moorings, or other structures, or the proposed location or relocation of any such structures
- Variance for which this application is made** . Explain in detail.
- Description of practical difficulty or particular hardship that this variance would solve.**
- Names, addresses and phone numbers of owners of abutting properties.**
- Names, addresses and phone numbers of others who could be directly affected by this variance, if granted.**
- Such other information as the District may require.**

By SIGNING application for a variance, the applicant consents to permitting officers and agents of the District to enter the variance area at all times to determine compliance with the ordinances of the District. Any persons violating District Ordinances can be held guilty of a misdemeanor punishable by fine or imprisonment.

Signature of Applicant: \_\_\_\_\_ DATE \_\_\_\_\_

VARIANCE GRANTED \_\_\_\_\_ DENIED \_\_\_\_\_ DATE \_\_\_\_\_

Attested: \_\_\_\_\_ DATE \_\_\_\_\_