

Meeting Date \_\_\_\_\_  
Hearing Time \_\_\_\_\_

**APPENDIX I  
APPLICATION FOR VARIANCE**

**FEE: \$50.00**

SPINK COUNTY  
STATE OF SOUTH DAKOTA

DATE \_\_\_\_\_  
RECEIPT NO. \_\_\_\_\_  
BP # \_\_\_\_\_

TO: Spink County Planning and Zoning Commission

\_\_\_\_\_ (name) is requesting a variance from the

Spink County Zoning Ordinance Title \_\_\_\_\_ Chapter \_\_\_\_\_

Legal description: \_\_\_\_\_

Property Address: \_\_\_\_\_

To build: \_\_\_\_\_

Reason variance is requested:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Owner's Signature \_\_\_\_\_

***\*\*\*No work may be started or completed without the approval of this Variance by the Spink County Planning and Zoning Board. Violation of this condition is punishable under Title 17.23. Violation thereof shall be a misdemeanor and may be punishable by a fine of up to \$200 for each and every day that the violator fails to comply.***

~~~~~**OFFICE USE ONLY**~~~~~

Inspection Report \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Inspected by \_\_\_\_\_ Date \_\_\_\_\_

Planning and Zoning Commission Action \_\_\_\_\_  
\_\_\_\_\_ Date \_\_\_\_\_

Conditions (if any) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_