



# CITY OF TWO HARBORS

522 First Avenue, Two Harbors, MN 55616  
(218) 834-5631 · FAX (218) 834-2674

## Variance Application

<b>1. Applicant Information</b>	
Name: _____	
Address: _____	
Telephone #: _____	Email Address: _____
Application # (to be assigned by City): _____	
<b>Signature of Applicant</b>	<b>Date:</b>
Owner (if different from above): _____	
Address: _____	
Telephone #: _____	Email Address: _____

<b>2. Property Information</b>	
Street Address: _____	
Legal Description (attach additional sheets if necessary): _____	
Parcel #: _____	
Zoning District _____	Shoreland Overlay Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No
Property Size (square feet or acres): _____	
<b>***Applicant to attach plat plan (drawn to scale)***</b>	

<b>3. Requested Variance</b>
Zoning Ordinance section Variance is requested from: _____
State exactly what is intended to be done on or with the property described above that does not conform with the Zoning Ordinance:



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**4. Explain in detail how your request conforms to the following requirements (*attach additional sheets if necessary*):**

4.1 That the landowner proposes to use the property in a reasonable manner not permitted by the Zoning Ordinance.

4.2 That the plight of the landowner is due to circumstances unique to the property not created by the landowner.

4.3 That the variance, if granted, will not alter the essential character of the locating neighborhood or district in which it is located.

### ***CITY USE ONLY***

The Variance Application is complete:

The Variance Application requires the modifications listed below:

Further information needed:

The variance is not permitted:

**Signature of Zoning Administrator**

**Date**