



COUNTY of ANNAPOLIS  
NATURALLY ROOTED

752 St. George Street, PO Box 100  
Annapolis Royal, Nova Scotia, Canada B0S 1A0  
Phone: (902) 532.2331 Fax: (902) 532.2096  
Website: [AnnapolisCounty.ca](http://AnnapolisCounty.ca)  
[planning@annapoliscountry.ca](mailto:planning@annapoliscountry.ca)

# VARIANCE APPLICATION

File #: \_\_\_\_\_

## Part 1 – Please complete the following information

Civic address of property and PID

What is the existing use of the property?

The application is to vary what requirement of the Land Use Bylaw? (Please check all that apply)

Size of yards (setbacks)  Ground Floor Area  Lot Coverage  Height of structure  Other(specify).....

Please provide a detailed description of the proposal which requires the variance.

Please provide an explanation as to why the variance request cannot be avoided and why other alternatives are not feasible.



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## Part 2 – Your completed application form must be accompanied with the following:

1. A copy of a plot plan drawn to scale and showing the proposed variance and the following items:
  - a. the dimension of the subject property;
  - b. the location and dimensions of existing and proposed buildings on the property and any proposed additions;
  - c. the distance from property lines to existing or proposed building and additions;
  - d. and, distances from property line to buildings on adjacent lots.

**Note:** A plot prepared by a Nova Scotia Land Surveyor may be required if the plot plan submitted does not permit the Development Officer to properly evaluate the application.

2. Additional information that may be required, if applicable include and drawn to scale, a copies of floor plans (existing and proposed), building elevations (building photos are acceptable) and parking layout.

| APPLICANT INFORMATION | REGISTERED OWNER(S) OF PROPERTY<br><i>(If different from applicant)</i> |
|-----------------------|---|
| Name:                 | Name 1:   |
| Company Name:         | Name 2:   |
| Mailing Address:      | Mailing Address:  |
| Email Address:        | Email Address:  |
| Phone Number:         | Phone Number  |

*PLEASE NOTE: Where the applicant is not the registered owner(s), a signed written authorization from the registered owner(s) must accompany this application.*

|   |                 |                 |
|---|-----------------|-----------------|
| <b>By signing this application, I (we) do solemnly declare that all the statements and attachments are true and accurate.</b> |                 |                 |
| Name _____  | Signature _____ | Date _____      |
| Name _____  | Signature _____ | Date _____      |
| <b>OFFICE USE ONLY</b>  |                 |                 |
| Date Received _____   | Date Paid _____ | Receipt # _____ |
| Development Officer's comment _____   |                 |                 |