

Application for Variance



City Of Sedona
Community Development Department
102 Roadrunner Drive Sedona, AZ 86336
(928) 282-1154 • Fax: (928) 204-7124

Name:		Date:	
Phone:		Case#:	
Cell Phone:		Fee:	
Address:			

Property Address:		Parcel #:	
Legal Description of property:		Lot size:	
or Legal Description is:	<input type="checkbox"/> Attached		

Statement of the precise nature of the variance requested: <input type="checkbox"/> Attached

Statement of the practical difficulty or unnecessary physical hardship that would result from a strict or literal interpretation and enforcement of the specific zoning regulation: <input type="checkbox"/> Attached

I hereby certify that I am the legal owner or authorized agent for the owner of the property for which this variance is being requested.	
Authorized Signature	Date