



Administrative Variance Application

ALL information below MUST be complete and LEGIBLE. Allow 10 days for processing once the complete information is received.

Date: _____

Variance Number: _____

STAFF USE ONLY

Received by: _____

Property Name: _____

Property Address: _____

District: Section: _____ Land Lot: _____ Parcel: _____

Owner Information:

Name: _____

Contact: _____

Email: _____

Address: _____

Phone: _____

Required Items for Submittal:

1. Fee *(Please make checks payable to City of Peachtree Corners)*

- | | | |
|--------------------------|---|-------|
| <input type="checkbox"/> | Single Family Residential (Owner occupied) | \$100 |
| <input type="checkbox"/> | Single Family Residential (Builder/Developer) | \$250 |
| <input type="checkbox"/> | Multi-Family | \$500 |
| <input type="checkbox"/> | Commercial | \$600 |

2. Detailed Survey/ Site Plan

3. Letter of Intent describing variance and justification for variance.

4. Other supporting documents supporting the variance request (photos, grading plan, specimen tree plan).

5. Letters of support from adjacent residential property owners (including front, sides and rear properties).

COMMUNITY DEVELOPMENT USE BELOW

Approved: _____ Denied: _____ Approved with conditions below: _____

Signature: _____ Date: _____