



**VARIANCE** CASE # VA \_\_\_\_\_  
**COMMUNITY DEVELOPMENT DEPARTMENT**  
**1203 N. HUDSON/PO Box 1188**  
**SILVER CITY, NM 88062 (575)534-6349 FAX (575)534-6381**

DATE  
STAMP

A variance allows a building, structure, or sign not in compliance with the Land Use Code to be built if strict enforcement of the code would result in practical difficulties or unnecessary hardships for the applicant. *A variance for a use is **not** allowed.* A variance request must be heard by the Planning and Zoning Commission. The application fee is \$75.

**\*NOTE:** Please fill out entire application and submit with ten (10) copies of all required documents listed below. *DO NOT* include copies of applications.

**REQUIRED DOCUMENTS:**

- Site plan of project showing setbacks and footprint of all structures within property boundary; *for a sign Variance a master signage plan is required*
- Proof of ownership (copy of deed)
- Paragraph explaining the reason for the variance request. The proposal must comply with Section 6.3.19 of the 2010 Land Use and Zoning Code

**VARIANCE to (cite section from Land Use Code):** \_\_\_\_\_

**PROJECTED PROJECT AND REASON FOR VARIANCE** \_\_\_\_\_

**PROPERTY INFORMATION:**

Property street address: \_\_\_\_\_

Adjacent streets \_\_\_\_\_

Zoned (please circle one): Rural Res A Res B Res C Commercial Industrial

Located in floodplain?  No  Yes: FEMA map # \_\_\_\_\_

Gross floor area of all structures located on the property: \_\_\_\_\_

**LEGAL DESCRIPTION:**

Platted: Lot(s) \_\_\_\_\_ Block(s) \_\_\_\_\_

Subdivision/Addition \_\_\_\_\_

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

Total area: \_\_\_\_\_ square feet Property code: 3- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

(The property code # can be obtained from the County Assessor's Office or from the tax bill)

**See other side**

**APPLICANT INFORMATION:**

Name: \_\_\_\_\_ Proprietary interest in  
property: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Alternate phone: \_\_\_\_\_ Email: \_\_\_\_\_

**OTHER CONTACT (Agent/Surveyor/Other):**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name of business: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Alternate phone: \_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant** **Date**

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**FOR PLANNING STAFF USE ONLY**

Fee:\$ \_\_\_\_\_ cash/ck.# \_\_\_\_\_ Paid: \_\_\_\_\_ Receipt #: \_\_\_\_\_  
To be heard by the Planning and Zoning Commission on \_\_\_\_\_

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**Decision of Planning and Zoning Commission**

\_\_\_\_\_ Approved  
\_\_\_\_\_ Denied

\_\_\_\_\_ Date of Planning and Zoning Commission hearing  
\_\_\_\_\_ Staff initials

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Conformance with conditions of approval verified:

By \_\_\_\_\_ Date \_\_\_\_\_