



SUBDIVISION VARIANCE APPLICATION

A Variance Application must be submitted at least four weeks prior to a meeting of the Weston City Council. Please use the most current version of this document. All forms and Ordinances may be obtained at www.westontexas.com or at City Hall.

- I, THE OWNER, WILL REPRESENT THIS APPLICATION TO THE CITY OF WESTON
- I, THE OWNER, HEREBY AUTHORIZE THE PERSON NAMED BELOW TO ACT AS MY AGENT IN PROCESSING THIS APPLICATION WITH THE CITY OF WESTON

SIGNATURE OF OWNER

PLEASE PRINT

OWNER INFORMATION

NAME _____
 MAILING ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____ ALT PHONE _____
 EMAIL _____

APPLICANT INFORMATION (IF DIFFERENT FROM OWNER)

NAME _____
 MAILING ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____ ALT PHONE _____
 EMAIL _____

PROPERTY INFORMATION

SUBDIVISION NAME _____
 SITE STREET ADDRESS OR GENERAL LOCATION _____
 COUNTY PROPERTY ID # (R-0000-000-0000-0) _____
 CURRENT ZONING _____ ACREAGE _____
 SUBDIVISION ORDINANCE SECTION FOR WHICH VARIANCE IS REQUESTED _____
 DESCRIPTION OF THE VARIANCE REQUESTED (ATTACH ADDITIONAL SHEET IF NECESSARY)

A variance may be granted by the City Council upon a good and sufficient showing by the owner that there are special circumstances or conditions affecting the property in question, or that strict enforcement of the provisions of this chapter will deprive the applicant of a substantial property right, and that such suspension, if granted, will not be materially detrimental to the public welfare or injurious to other property or property rights in the vicinity. Each and every application for variance shall be decided solely and entirely on its own merits and the disposition of any prior or pending application for variance shall not be allowed to enter into or affect any decision on the application in question. Pecuniary interests standing alone shall not be justification for the granting of a variance. The granting of the variance will not conflict with the general purpose and intent of the Weston Comprehensive Plan, the Zoning Regulations, the Subdivision Regulations or any other applicable Ordinance of the City.

DECLARATION:

I hereby certify that I have read and examined this application and know that same to be true and correct. All laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. I certify I am the owner or duly authorized representative of the owner whose name appears on this application and I am fully authorized to bind the owner in executing this application.

Signature

Date



CONFLICT OF INTEREST STATEMENT

The City of Weston requires persons seeking to enter discretionary contracts with the City or appearing before the City Council or another City board or body to disclose certain relationships and conflicts of interest.

A person appearing before the City Council, the Board of Adjustment or any City board for the purpose of doing business with the City shall disclose to that body or board any facts known to such person which may show or establish that:

- (1) An employee of officer of the City that advises or makes presentation to the City body or board or
- (2) Any member of the City body or board

has, or may have, a conflict of interest pursuant to Chapter 171, Tex. Local Gov't. Code, or an interest which would violate the ethical standards if he or she were to participate in the processing or consideration of the subject matter.

Are there any financial, business, or personal relationships between the owner of the property, the selling agent, the brokerage firm, the developer or builder, the consultants and/or purchasers of the property and members of the City of Weston City Council, Board of Adjustment or any other City body? No Yes **If yes, please provide details.**

Signature of the person completing this form

Owner

Owner's Authorized Representative

Printed Name

Signature

Date

STATE OF TEXAS §
 §
COUNTY OF COLLIN §

This instrument was acknowledged before me on the ____ day of _____, 20__, by _____.

My Commission Expires on

Public in and for the
State of Texas

Type or Print Notary's Name