



**Town of Shenandoah
426 First Street
Shenandoah VA 22849
(540) 652-8164**

REQUEST FOR VARIANCE APPLICATION INSTRUCTIONS

It is the responsibility of the applicant to complete this form in its entirety and as precisely as possible.

A *non-refundable* filing fee of **\$500.00** is due when application is returned

Checks should be made payable to **Town of Shenandoah**. Credit/debit cards are also accepted.

Please return the following documentation along with the completed application and payment:

1. A copy of the deed to the property (may be obtained from the Page County Circuit Court). Also, attach a copy of the paid tax receipt for the property (may be obtained from the Shenandoah Town Office).
2. A copy of a survey plat by a registered surveyor, licensed in Virginia (if available) OR a hand-drawn sketch of the property. On this plat or sketch, draw all existing buildings and the proposed structure (show size and shape) including measurements to the property lines and streets.
3. The applicant is responsible for payment of all other fees associated with this request (i.e. advertisement, notice to adjacent property owners, fees for site-committee visit/report, etc). Upon approval, the applicant must obtain a building permit from Page County prior to construction.
4. Questions may be directed to the Town Hall at (540) 652-8164. Hours of operation are 8:30 a.m. to 5 p.m. Monday through Friday. The office is closed daily for lunch from 12 noon to 1 p.m.

Please note: ADDITIONAL INFORMATION MAY BE REQUIRED IF THE TOWN DETERMINES IT IS NECESSARY TO ENSURE THE REQUEST CONFORMS WITH THE CODE OF THE TOWN OF SHENANDOAH AND ALL STATE CODE REQUIREMENTS.

A Variance Hearing will be held by the Shenandoah Town Board of Zoning Appeals regarding this request.



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REQUEST FOR VARIANCE APPLICATION

ZONING APPEAL NO: _____

FEE: \$500.00

DATE: _____

DENSITY RANGE: _____

The applicant is the ☐ **OWNER** ☐ **OTHER (check one)**

OWNER'S Name _____

Address: _____

Phone: _____

OCCUPANT'S Name _____

Address: _____

Phone: _____

1. Address of property: _____
2. Size of property: _____
3. Tax Map number: _____
4. It is desired and requested that the property be varied FROM _____ feet _____ yard
TO _____ feet _____ yard setback.
5. It is proposed that the following buildings/additions will be constructed: _____
6. Property is currently zoned: _____
7. Applicant's additional comments, if any: _____

I (we) the undersigned do hereby certify that the above information is correct and true. I (we) further understand the Town of Shenandoah requires that I (we) pay all other fees associated with this request (i.e. advertisement, notice to adjacent property owners, fees for site-committee visit/report, etc.). I (we) further understand that if this application is approved, the Board of Zoning Appeals may require that I (we) comply with certain conditions and that such approval shall not be considered valid until these conditions are met.

Signature of Owner(s): _____

Signature of Owner(s): _____

OFFICE USE ONLY:

**NAMES AND COMPLETE MAILING ADDRESSES OF ALL ADJACENT
PROPERTY OWNERS, INCLUDING ACROSS ANY STREET OR OF RIGHT-
OF-WAY. (Continue on a separate sheet if necessary).**

1. OWNER'S Name _____

Address: _____

2. OWNER'S Name _____

Address: _____

3. OWNER'S Name _____

Address: _____

4. OWNER'S Name _____

Address: _____

5. OWNER'S Name _____

Address: _____

BOARD OF ZONING APPEALS

Dates public hearing was advertised: _____

Date of public hearing: _____

Action of Board of Zoning Appeals: ☐ APPROVED ☐ DENIED

Conditions, if any: _____

Chairman, Board of Zoning Appeals

NOTICE OF VARIANCE HEARING/REQUEST
(To be provided to all adjacent property owners.)

DATE: _____

TO ADJOINING PROPERTY OWNERS OF:

Name of Property Owner _____

Address of Property _____

Tax Map No. _____

Please be advised that a public hearing will be held by the Town of Shenandoah Board of Zoning Appeals regarding a VARIANCE REQUEST on the above-listed property.

This Variance Request is due to the fact that the proposed construction of _____ does NOT meet the required setbacks from the property line. Please find enclosed a map showing the approximate location of the proposed construction on this property.

For information regarding the time and date of the Public Hearing, please contact the Shenandoah Town Office at (540) 652-8164, 8:30 am to 5 pm, Monday through Friday (closed daily for lunch from 12 noon to 1 pm). The public will be invited to express their views at the public hearing.

Should you have any questions regarding the proposed construction please contact me at _____.

(Phone # of Applicant)

Thank you.