



APPLICATION FOR VARIANCE

Town of Westlake | 1500 Solana Boulevard, Building 7, Suite 7200 | Westlake, TX 76262

Phone: (817) 430-0941

Email: planning@westlake-tx.org

Description of Property

Property Address: _____

General Location: _____

Subdivision Name: _____ Lot(s): _____ Block(s): _____

Current Zoning: _____ Total Acres: _____

Applicant Information

Applicant's Name: _____

Property Address: _____

City, State, ZIP: _____

Email: _____ Phone: _____

Variance Request

Variance Requested: _____

Describe Nature of Hardship: _____

Office Use Only

Case Number: _____ Submittal Date: _____

Fees: _____ Received By: _____



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Designation of Agent Form

I hereby authorize the person designated below, to act in the capacity as my agent for the application, processing and the representation of this request. The designated agent shall be the principal contact person with the Town of Westlake (and vice versa) in processing and responding to requirements, information requests or other issues relative to this request.

PROPERTY OWNER

Printed Name:

Signature:

Date:

APPLICANT

Printed Name:

Signature:

Date:

DESIGNATED AGENT

Printed Name:

Signature:

Date:

Property Address:

City, State, ZIP:

Email:

Phone:
