

Variance Request Application
City of Villa Grove, Illinois

(There will be a non-returnable \$100.00 charge for processing this application.)

Applicant

Name _____ Date _____
Mailing Address _____ Phone _____
City _____ State _____ Zip _____

Description of property for which application is requesting a variance

Legal Description _____

Street address _____
Brief description of the requested variance _____

Please make a drawing in the space below (or on the back of this application form) that shows the location and dimensions of the property for which the variance is being requested with street names of abutting and surrounding streets plus existing alleys. If possible, please show the dimensions for the variance request. Also, show the compass direction with a labeled arrow for North, East, South or West.