

BLEPOA VARIANCE REQUEST FORM

Permit #: _____ Date: _____

Property Owner: _____

Lot #: _____ Blue Lake Address: _____

Mailing Address: _____

Primary Phone: _____ BL Phone: _____

Cell Phone: _____ Variance Fee: _____ Ck: _____

Contractor Information: _____

Contractor Phone (Office): _____ Cell: _____

Variance Requested: _____

Variance Plan(s) Received: _____ Date Received: _____

Variance Plan Reviewed: _____

Variance Plan: POA APPROVAL POA DENIAL

BLEPOA Signature: _____ Date: _____

Variance Plan: HILLTOP APPROVAL HILLTOP DENIAL

HILLTOP Signature: _____ Date: _____

Variance Plan: LAKESIDE TOWNHOMES APPROVAL DENIAL

LAKESIDE TOWNHOMES Signature: _____ Date: _____

Variance Filed By: _____ Date: _____