



Village of Marwayne Variance Application

PO Box 113, 210 - 2nd Ave South, Marwayne, AB T0B 2X0
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Office Use Only:

Variance Permit Application No.: _____ Development Permit Application No.: _____ Variance Application Fee: _____

Date of Application: _____ Applicant Name: _____ Roll Number: _____

VARIANCE PERMIT CHECKLIST

- Completed and signed variance permit application
- Application fees, paid in full
- Completed development permit application (and all of its requirements), attached to this application

VARIANCE INFORMATION

Proposed Variance (attach additional sheets if necessary):

Reason for Variance (attach additional sheets if necessary):

How have you minimized the potential impact the variance will have on neighbouring parcels and the public realm (attach additional sheets if necessary):

APPLICANT'S SIGNATURE

I have reviewed all of the information supplied to the Village of Marwayne with respect to this application for a Variance and confirm that it is true and accurate to the best of my knowledge and belief. I understand that the Development Authority will rely on this information in its evaluation of my application for a Variance and that any decision made by the Development Authority based on inaccurate information may be rescinded at any time.

Signature of Applicant: _____ Date: _____

