

## **Sweetwater Fire Department Prevention Division**

900 E Broadway | Sweetwater, TX 79556 | (325)235-4304 | jsmith@coswtr.org

## VARIANCE REQUEST TO THE FIRE CODE/ORDINANCE

Variance Application Form

APPLICANT'S INFORMATION (Primary Contact for the Project): Name:

Mailing Address		City	
State	Zip Code	E-Mail Address	
Phone Number		Fax Number	
PROPERTY OWI	NER'S INFORMATION:		
Name			
Mailing Address		City	
State	Zip Code	E-Mail Address	
Phone Number		Fax Number	
LOCATION OF P Address	ROPERTY:		
Action Requested:			
Applicable Ordinan	ce/Code Number:		

## **VARIANCE REQUEST**

The following specific variation from the ordinance or technical codes is requested:
This variance is necessary due to the following special conditions and circumstances:
This request is the minimum variance that will make possible the reasonable use of the building, structure, or service system by virtue of the following fact(s):
This variance will be in harmony with the with the general intent and purpose of the technical codes and will not be detrimental to the public health, safety and welfare by virtue of the following fact(s):
The applicant has prepared this application and certifies that the facts stated herein and exhibits attached hereto are true, correct and complete.
Signature and Title:
Date:
FIRE MARSHALS STATEMENT OF APPROVAL, ADDITIONAL REQUIREMENTS OR DENIAL OF VARIANCE REQUEST.
APPROVED
APPROVED WITH ADDITIONAL REQUIREMENTS
DENIED
Comments: