

**TOWNSHIP OF LEXINGTON**

**APPLICATION FOR VARIANCE  
ZONING BOARD OF APPEALS**

\_\_\_\_\_  
Applicants Name(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Address

\_\_\_\_\_  
Property Tax Code

\_\_\_\_\_  
Post Office, State and Zip Code

\_\_\_\_\_  
Phone

If applicant is not registered owner, attach authorization of owner.

\_\_\_\_\_  
\_\_\_\_\_

**LEGAL DESCRIPTION OF PROPERTY:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REASON FOR APPLICANT'S REQUEST:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SITE PLAN:** Attach to each copy of this application a map with a scale of not less than 1" equals 100 feet, identifying the land and structures involved, the prospective development of the property, the existing zoning classification of all abutting land within 300 feet, and all public and private rights of way and easements bounding and intersection the land.

- Applicant will be represented by Attorney \_\_\_\_\_ at the hearing
- Applicant will not be represented by an Attorney at the hearing.

FURTHER INQUIRIES MAY BE DIRECTED TO APPLICANT UPON REVIEW OF THE APPLICATION AND DOCUMENTS ATTACHED.

\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant(s)