



# Bureau & Putnam County Health Department

526 Bureau Valley Parkway • Princeton, IL 61356

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Office Hours: Monday - Friday ♦ 8:00 a.m. - 4:00 p.m.

2008

## Request for Variance

Permit Number (on Application): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Property ID # \_\_\_\_\_  New Home/Building  Existing Home/Building, Repair / Replace

Owner \_\_\_\_\_ Mailing Address \_\_\_\_\_

Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Site Address: \_\_\_\_\_

Site Location: Township \_\_\_\_\_ = T \_\_\_\_\_ (N) / (S), R \_\_\_\_\_ (W) / (E) Section \_\_\_\_

Subdivision \_\_\_\_\_ Addition \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Contractor \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

License Number: \_\_\_\_\_ - \_\_\_\_\_

### **Variance Requested & Reason For Variance:**

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

**Property Owner's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

(affected) Neighboring Property Owner(s) Signature \_\_\_\_\_ **Date** \_\_\_\_\_

**If multiple neighboring property owners are involved please have each sign and date back of form.**

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### **Environmental Health Staff Observations/Recommendations:**

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

\_\_\_\_\_  
Director of Environmental Health / Sanitarian \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date

Variance Request:  grant  deny

\_\_\_\_\_  
Administrator / Director of Environmental Health \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date

Variance Request:  grant  deny