



VARIANCE REQUEST FORM

Date:	Lot#:	Street Address:
Owner Information:	Name	
	Phone	
		
as filed with Livingsto	on Parish.	ollowing covenants as contained in the Acts of Restrictions
	(Please provi	ide Article number, section and paragraph)
The variance I am rec	juesting is as folic	DWS:
		
Reason or Justificatio	n for Variance:	
C use only: Date Recei	ived	Date Reviewed
		VARIANCE #:
approved:		