



Variance Request

Date: _____

Business Name: _____ Address: _____

Phone: _____

Property Owner: _____ Address: _____

Phone: _____

Person Requesting Variance (if different): _____

Phone: _____

Type of Variance Requested: _____

Code or Ordinance #: _____

If needed, please attach a separate sheet explaining reason (s) for your variance request.

If a variance is granted, I will not hold the Wentzville Fire Protection District, the Fire Chief, or any representative of the Wentzville Fire Protection liable for any damages or injuries resulting from this variance during a fire or emergency situation.

Signed: _____ Dated: _____

Do not write below this line

.....
.....

Date of hearing: _____ Variance has been: _____

With restriction (s): _____

Signed this date _____, by the Board of Directors of the Wentzville Fire Protection District of St. Charles County, Missouri.

Jennifer Houston, Chairperson

Robert Hawkins, Director

Frank Grassmuck, Director