



CITY OF DIBOLL  
400 KENLEY  
PO BOX 340  
DIBOLL, 75941  
936-829-4757  
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PLAN APPROVAL	
Planning & Zoning	(DATE)_____
Site Plan Review	(DATE)_____
Building Plan Review	(DATE)_____

## VARIANCE REQUEST

OWNER NAME:

OWNER PHONE NO:

OWNER EMAIL ADDRESS:

PROPERTY ADDRESS:

OWNER MAILING ADDRESS IF DIFFERENT FROM PROPERTY ADDRESS:

ANGELINA COUNTY APPRAISAL DISTRICT PROPERTY ID #:

ORDINANCE FOR VARIANCE REQUEST:

DETAIL DESCRIPTION REGARDING YOUR VARIANCE REQUEST:

*Note: Further documentation may be requested before your request can be submitted!*

I ACKNOWLEDGE THAT ALL DOCUMENTAION, PERMIT APPLICATION, & APPLICATION FEES MUST BE SUBMITTED & REVIEWED BEFORE A PERMIT IS ISSUED. ALL FEES ARE FOR APPLICATION ONLY AND DOES NOT GUARANTEE APPROVAL.

X \_\_\_\_\_ DATE: \_\_\_\_\_