



Case #: \_\_\_\_\_

### APPLICATION FOR WAIVER REQUEST

#### PLANNING DEPARTMENT

171 North Ross Street, Suite 100  
Auburn, AL 36830  
(334) 501-3040 ~ Fax: (334) 501-7293

Applicant Name: _____	Project Name: _____
Mailing Address: _____	Site Address: _____
_____	Phone Number: _____
Email Address: _____	Fax Number: _____

**A COPY OF THE DEED TO THE SUBJECT PROPERTY MUST BE SUBMITTED WITH THIS APPLICATION. If the applicant is not The owner, then a letter allowing the applicant to act as an "authorized agent" must be on file. ONE FULL-SIZE PAPER COPY AND ONE REDUCTION (11 x 17 or 8½ x 11) MUST ALSO ACCOMPANY THE APPLICATION. All associated fees will be charged to the applicant unless otherwise arranged.**

General Location: \_\_\_\_\_

Gross Area of Subject Property: \_\_\_\_\_ Number of Individual Units: \_\_\_\_\_

Current Use: \_\_\_\_\_ Current Zoning District: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Type of Waiver Requested:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the proposed development to be on an existing lot of record?  Yes  No

Is the proposed development on a designated corridor?  Yes  No

Is site plan approval contingent on any other official action by the City?  Yes  No If yes, please specify:

- Annexation  Subdivision plat approval
- Rezoning  Other: \_\_\_\_\_

Member of Planning Department reviewing this application: \_\_\_\_\_

**Required Documents Attached:**

- Deed  Authorization to Act as Applicant  One full-size Copy  Reduction

*I, the applicant, certify that all of the above facts are true and correct to the best of my knowledge. I understand that any development approval(s) granted pursuant to this application shall be subject to all applicable regulations of the City of Auburn, and that such approval(s) shall expire unless construction has commenced within eighteen (18) months following date of approval.*

Applicant's Signature: _____	Date: _____
Applicant's Name (Please print): _____	

Received By: \_\_\_\_\_ Date: \_\_\_\_\_