



**West Fort Bend Management District  
Richmond Corridor  
Variance Application**

Submit this application and the appropriate (completed) checklist with required documents to the City of Richmond, Permits Department, 600 Morton Street, Richmond, Texas, 77469, phone 281-232-6871.

**Project Name:** \_\_\_\_\_

**Type of Project:**

- |   |  |
|---|--|
| <input type="checkbox"/> Business/Office          | <input type="checkbox"/> Planned Development   |
| <input type="checkbox"/> Multi-Family Residential | <input type="checkbox"/> Commercial/Industrial |

**Applicant/Project Manager's Information (Primary Contact for the Project)**

Contact Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Property Owner's Information**

Contact Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Planner or Engineer's Information**

Contact Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Property Location**

Legal Description: \_\_\_\_\_  
Fort Bend CAD Property ID: \_\_\_\_\_  
Fort Bend CAD Account No.: \_\_\_\_\_  
Geographic Location (List major streets, bayous, creeks, and adjacent developments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Property Information**

Total Acreage: \_\_\_\_\_ Number of Lots: \_\_\_\_\_  
Number of Streets: \_\_\_\_\_ Number of Blocks: \_\_\_\_\_  
Adjacent Roads: \_\_\_\_\_

**Current Use and Improvements:**

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

**Description of any prior petition for appeal, variance, or conditional use:**

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

**Describe the effects on the property if the variance is not granted:**

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

**Mitigation:**

(Describe your proposed mitigation for each requested variance)

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

**Alternatives:**

(Describe alternatives to your proposal such as other locations, designs and construction techniques. Attach a site map showing alternatives you considered in each category below)

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

**Required Documents:**

Applications for Variance shall contain or have attached thereto the following information:

- Variance Application Form completed in its entirety.
- Three (3) full-sized (24" x 36") and three (3) reduced (11" x 17") printed, full color copies of the plat and/or site plan clearly showing the following details:
  - o Building Setback Lines
  - o Parking Setback Lines
  - o Building Facade Materials \*
  - o Landscaping Detail \*
  - o Lighting Detail \*
  - o Right-of-way boundaries for all major thoroughfares adjacent to property
  - o Property Boundaries
  - o Proposed Mitigation
- CD or DVD containing a color, high-resolution, electronic copy of plat with the same detail as printed copies in Adobe Acrobat (PDF) format.

\* when applicable to nature of variance request.

Submittal Fee:     \$500.00    

Check Number: \_\_\_\_\_

This is to certify that the information on this form is complete, true, and correct and the undersigned is authorized to make this application.

X

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**Signature of Applicant**

**Date**