



City of San Angelo, Texas – Planning Division
52 West College Ave
Application for Variance from Sign Regulations



Section 1: Basic Information

Name of Applicant(s): _____

- Owner Representative (Notarized Affidavit Required)

Mailing Address _____ City _____ State _____ Zip Code _____

Contact Phone Number _____ Contact E-mail Address _____

Subject Property Address _____ City _____ State _____ Zip Code _____

Legal Description (*can be found on property tax statement or at www.tomgreencad.com*)

Zoning District:

- CN CO CG CH CG/CH CBD OW ML MHS MHP PD
 RS-1 RS-2 RS-3 RM-1 RM-2 R&E

(Zoning Map available on [City Maps](#))

Section 2: Sign/Property Characteristics

Specific Description of Request: _____ Illuminated? Yes No

Width: _____ Height: _____ Total area in square feet: _____

I assert that my request for variance meets all of the required criteria based on my explanation(s) below:

That special circumstances or conditions would substantially restrict the effectiveness of the sign in question;

Explain: _____

That such special circumstances were not created by the applicant;

Explain: _____

That the granting of the variance will be in general harmony with the purpose of the sign ordinance and will not be materially detrimental to the adjacent property or neighborhood or to the general public;

Explain: _____

That the variance applied for represents the minimum variance necessary to afford relief from the hardship;

Explain: _____

That the variance applied for, does not depart from the provisions of the sign ordinance any more than is required;

Explain: _____

Section 3: Applicant(s) Acknowledgement

(By checking the boxes you indicate that you understand below regulations for the Planning Commissions case.)

- I understand that the Planning Commission is bound by the criteria established by state law; I further understand that my request is not guaranteed to be approved and that it constitutes an exception from regulations of the City of San Angelo;
- I understand that any variation(s) authorized by the Planning Commission will require me/us to obtain a building permit for that stated variation within twelve (12) months of the approval date by the Board, unless the Board has specifically granted a longer period;
- I understand that all drawings, pictures, documents or other information used during your testimony to the Board must be kept in the permanent files of the Planning Division; and
- I understand that any petition of a decision made by the Planning Commission must be appealed to the City Council within thirty (30) days after receipt of the results notification of such action. The petition must state that the decision of the Planning Commission is illegal in whole or part and specifying the grounds of the illegality.

I/We the undersigned acknowledge that the information provided above is true and correct.

Signature of licensee or authorized representative

Date

Printed name of licensee or authorized representative

Name of business/Entity of representative

FOR OFFICE USE ONLY:

Verified Complete Verified Incomplete

Date of Application: ____/____/____

Case No.: ____--____

Fully-dimensioned and scaled site plan: __ Yes __ No

Nonrefundable fee: \$ ____

Receipt #: _____

Date paid: ____/____/____

Date to be heard by PC: _____

Reviewed/Accepted by: _____

Date: ____/____/____