

**CITY OF MANSFIELD  
VARIANCE / ZONING REQUEST**

**DATE:** \_\_\_\_\_

**Case No:** \_\_\_\_\_ (Assigned by City)

**Name of Applicant:** \_\_\_\_\_

**Address of Property:** \_\_\_\_\_

**Tax Parcel:** \_\_\_\_\_

**Request:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Purpose of Request:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Size of Property:** \_\_\_\_\_

**Present Zoning:** \_\_\_\_\_  
\_\_\_\_\_

**Potential Effects on Town:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_