



STEINER RANCH MASTER ASSOCIATION (SRMA) AND  
STEINER RANCH RESIDENTIAL OWNERS ASSOCIATION (SRROA)  
ARCHITECTURAL COMMITTEES  
VARIANCE REQUEST FORM

Applicant Name: \_\_\_\_\_ Date Requested: \_\_\_\_\_

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

Applicant Contact Phone Numbers: \_\_\_\_\_

Requesting variance for the following address: \_\_\_\_\_

Reason for variance: \_\_\_\_\_

Justification for variance: \_\_\_\_\_

Date by which variance is needed: \_\_\_\_\_

Please submit this form and all applicable documentation to justify the variance request. **You must explain why your request is unique and should be granted.**

**ALL VARIANCE REQUESTS MUST BE SUBMITTED A MINIMUM OF SEVEN DAYS BEFORE VARIANCE IS NEEDED. IF A VARIANCE IS REQUIRED AND SEVEN DAYS NOTICE IS NOT GIVEN, A \$100.00 FEE WILL APPLY FOR PROCESSING.**

\_\_\_\_\_  
Applicant Name (Print)

\_\_\_\_\_  
Signature of Applicant

VARIANCE IS:	<input type="checkbox"/> Granted	<input type="checkbox"/> Not Granted	DATE: _____
_____			
_____			
_____			
_____			
_____	_____	_____	
AC Representative	AC Representative	AC Representative	