

**WESTERN U.P. HEALTH DEPARTMENT**  
**Superior Environmental Health Code Variance Request Approval/Denial Form**

Application Date: \_\_\_\_\_ Case # and/or Permit #: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Property Location: County: \_\_\_\_\_ Township: \_\_\_\_\_ Section #: \_\_\_\_\_ Township #: \_\_\_\_\_ Range #: \_\_\_\_\_  
Fire #/ Street Address: \_\_\_\_\_

Quote the Superior Environmental Health Code Section from which a variance is requested:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe the variance requested:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Section 8.1 of the Superior Environmental Health Code requires the following conditions for variance approval. Attach plans and specifications as needed to demonstrate:

- No substantial health hazard or nuisance is likely to occur.
- Strict compliance with the code requirements would result in unnecessary or unreasonable hardship to the petitioner.
- No state, local statute, or other applicable laws would be violated.
- The protection of the health, safety, and general welfare of the public is assured.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR HEALTH DEPARTMENT USE**

Field Sanitarian: _____	Site Evaluation Date: _____
Recommendation: _____	
_____	
Signature: _____	
Date: _____	

Information regarding a request for a variance from the Superior Environmental Health Code has been received and reviewed by an authorized representative of the health department. In accordance with Article 8, Section 8.1, a variance from the specific requirements of the Superior Environmental Health Code is hereby:

**APPROVED**  
And contingent upon the following special practices or conditions:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DENIED**  
Based on the following reasons:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E.H. Director or Health Officer: \_\_\_\_\_ Date: \_\_\_\_\_