

HIGHWAY ACCESS VARIANCE APPLICATION

Fulton County Engineer's Office

Date: _____ Application No.: _____

Applicant: _____

Address: _____

Telephone: _____ Fax: _____

Location Description: _____

Nature of Variance Requested: _____

Justification of Variance: _____

(Attach supplemental sheets as necessary)

I certify that all information contained in this application and its supplements is true and correct.

Signature: _____

.....

County Engineer's Office Use Only

Date Received: _____

Action: _____

Comments: _____

Signature: _____

Date