



Central Bowie County WSC
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Request for Variance

1. I request a variance be considered by the Central Bowie County WSC Board of Directors.

2. Name: _____
Address: _____
Phone: _____
Other: _____

3. Rule/Policy for which variance is requested:

4. Special conditions/situation/circumstances which might justify a variance:

5. Requested outcome:

6. I will / will not (circle one) be present at the meeting.

Signature: _____

A. Variance will be considered on the agenda at the Board of Directors Meeting scheduled for:

B. Pertinent facts/rules etc.:

C. Acknowledgement

Hal Harris
General Manager