

Appeal No. _____
Date Filed _____
Date of Notice _____

BOARD OF ZONING APPEALS

Appeal for variance

(Please check one) **Single family/owner occupied:** _____
Rental/+ all others: _____

TO BE COMPLETED BY THE APPELLANT:

Appellant: _____ Address _____ Phone _____

Owner: _____ Address _____ Phone _____

Location of property: _____
Street and number Addition - Lot and block

This appeal is for a variance to allow _____

It is your responsibility to prove to the Board of Zoning Appeals that your appeal should be granted on the basis of how it applies to the four requirements given below. Please be specific. If you need additional space, you may use another sheet of paper.

Are there unique circumstances (such as topographical problems) about the land itself or special conditions applicable to your property or to the intended use that do not apply generally to the other property in the same vicinity and zoning district?

Strict application of the zoning ordinance would constitute unnecessary hardship or practical difficulty to you because

The variance is necessary for the preservation and enjoyment of a substantial property right possessed by other property in the same vicinity, but which is denied to your property because _____

The granting of the variance will not be materially detrimental to the public welfare or injurious to the property or improvements in such vicinity or zone in which your property is located because _____

Other reasons that you may have which are similar to those above _____

I hereby certify that the above statements and plans submitted herewith are true to the best of my knowledge.

Date: _____

Signature of applicant

Plot plan must be submitted with the application.

Variance – Single family/owner occupied - \$100.00

Variance – Rental / + all others - \$200

Variance + Conditional Use - \$250

Conditional Use - \$250

Special Hearing - +\$50

Email address of applicant

Receipt number: _____

Amount paid: _____