



The Zoning Board of Appeals may grant a variance from the dimensional requirements (i.e. height, setback, bulk) of the Zoning Ordinance upon finding that practical difficulties exist. An applicant must demonstrate that ALL of the statements below are TRUE.

Provide a written response to each of the questions below. Additional information may be provided on separate sheets if the space on this form is inadequate.

1. Describe the circumstances unique to the subject property that are not found on other properties in the area or other properties in the same zoning district. \_\_\_\_\_  
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2. Describe how the variance will provide substantial preservation of a property right to the applicant/property owner and other property owners. \_\_\_\_\_  
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3. Explain why the variance will not adversely affect adjacent property owners.  
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4. Explain why the variance will not materially impair the intent and purpose of the Zoning Ordinance.  
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5. Describe how the problem and the need for the variance is not self-created by the applicant/property owner or the previous property owner? How did the problem come about?  
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**Applicant Endorsement: The undersigned applicant agrees to the following items:**

- A. The applicant hereby grants permission to members of the Zoning Board of Appeals, City staff, and City consultants to enter the subject property for inspection in connection with this application.
- B. Arguments to the Zoning Board of Appeals regarding any application should be presented only to the entire board, in writing and at a meeting. Contacts and conversations with individual ZBA members outside of a meeting are inappropriate and the applicant should not seek to contact ZBA members individually, If the applicant has a question or wishes to convey any comments in addition to those in this application, these should be directed to the Director of City Services (DCS) or the City Clerk.
- C. All information contained herein and attached is true and accurate to the best of my knowledge. I acknowledge that the Zoning Board of Appeals will not consider my application or request unless all the information in this application and the Zoning Ordinance have been submitted. I further acknowledge that the City and its employees shall not be held liable for any claims that may arise as a result of acceptance, processing, or approval of this request for variance.
- D. An application must be received at least twenty five (25) days prior to the next meeting date of the Zoning Board of Appeals in order to be placed on that agenda. All supporting documents necessary for proper notification of properties within 1,000 feet must be submitted at this time.
- E. The DCS is authorized to determine the adequacy of supporting material for the ZBA members to be able to properly understand the details of the request. The DCS may in his/her judgment request further information, drawings or photographs so that ZBA members can adequately understand the issues.
- F. Drawings must be to scale and must have sufficient fidelity and clarity so that ZBA members have an unambiguous image of the object(s) drawn.
- G. Placement on the ZBA agenda may be delayed if the DCS does not have the required materials so that the members of the ZBA receive the material ten days prior to the meeting.
- H. **The Board of Appeals members make on site inspections of all requests. Your property lines and proposed construction must be clearly marked at least one (1) week prior to the hearing date. Wood stakes or florescent paint lines are acceptable. If the Board Members are unable to clearly define the property in question because of failure of applicant to comply with this requirement, NO ACTION WILL BE TAKEN AT THE SCHEDULED PUBLIC HEARING.**

\_\_\_\_\_  
Printed Name of Property Owner

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Property Owner Signature

\_\_\_\_\_  
Date

Property Owner is Applicant (If yes, check box and leave the rest of the application blank)

\_\_\_\_\_  
Applicant Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email Address

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

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

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

**Application Date:** \_\_\_\_\_

**Fee Amount Paid:** \_\_\_\_\_ **Date Paid:** \_\_\_\_\_ **Receipt#** \_\_\_\_\_