



PLAN REVIEW & PERMITTING DEPARTMENT

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FOR OFFICE USE

DOCKET NO.: _____
 MAP: _____, BLOCK: _____, PARCEL: _____
 ZONING DISTRICT: _____
 DATE OF FILING: _____

ADMINISTRATIVE ADJUSTMENT REQUEST

Note: The request shall not exceed 20 percent of the unmodified standard from the provisions of the following dimensional requirements: 1) Buffer yard and building/structure setback requirements; 2) Distance requirements outlined in Section 4.9; 3) Building height; 4) Parking space and parking aisle dimensions

IF YOU BELIEVE THERE IS A POTENTIAL FOR NEIGHBORHOOD OPPOSITION, IT IS STRONGLY RECOMMENDED THAT AN APPLICATION BE SUBMITTED DIRECTLY TO THE BOARD OF ZONING APPEALS PURSUANT TO THE STANDARD VARIANCE PROCESS.

PROPERTY LOCATION			LOT SIZE - ACERAGE
PROPERTY OWNER(S)			TELEPHONE
PROPERTY OWNER(S) ADDRESS	CITY	STATE	ZIP
APPLICANT/OWNER REPRESENTATIVE			TELEPHONE
APPLICANT/OWNER REPRESENTATIVE ADDRESS	CITY	STATE	ZIP
APPLICANT'S LEGAL INTEREST IN THE ABOVE PROPERTY:			
<input type="checkbox"/> OWNER (INCLUDING JOINT OWNERSHIP) <input type="checkbox"/> LESSEE <input type="checkbox"/> CONTRACT TO RENT/LEASE <input type="checkbox"/> CONTRACT TO PURCHASE <input type="checkbox"/> OTHER (PLEASE SPECIFY)			
HAVE ANY PREVIOUS PETITIONS OR APPEALS INVOLVING THIS PROPERTY BEEN MADE? YES _____ NO _____			
IF YES, LIST DOCKET NUMBER(S):			
1 - SPECIFY THE ARTICLE AND SECTION OF THE ORDINANCE AND THE PARTICULAR REQUIREMENT(S) FROM WHICH THE ADJUSTMENT IS DESIRED: EXAMPLE: Article 5A, Section 5A.5 – Requires 15-ft. side yard setback. Requesting adjustment to 12-ft. for detached garage			
2 - WHAT ARE THE EXTRAORDINARY CONDITIONS PERTAINING TO THE PARTICULAR USE OR DEVELOPMENT PROPOSED, OR TO THE PIECE OF PROPERTY IN QUESTION BECAUSE OF ITS SIZE, SHAPE, TOPOGRAPHY OR OTHER CONDITION, WHICH JUSTIFY THE ADJUSTMENT REQUEST? HOW ARE THE EXTRAORDINARY CONDITIONS PECULIAR OR UNIQUE TO THE USE OR DEVELOPMENT PROPOSED?			

3 - HOW WOULD THE STRICT APPLICATION OF THE ORDINANCE'S REQUIREMENTS TO THE USE OR DEVELOPMENT PROPOSED, OR TO THIS PIECE OF PROPERTY IN PARTICULAR, RESULT IN A PRACTICAL DIFFICULTY OR UNDUE HARDSHIP?

4 - WHAT CONDITIONS, FACTORS AND/OR CIRCUMSTANCES GIVE ASSURANCE THAT A GRANT OF THE REQUESTED ADJUSTMENT WOULD NOT CAUSE SUBSTANTIAL DETRIMENT TO OTHER PROPERTY OWNERS, NEIGHBORING RESIDENTS, OR TO THE PUBLIC GOOD, AND WOULD OBSERVE THE PURPOSE AND INTENT OF THE ORDINANCE? (USE A SEPARATE SHEET IF NECESSARY.)

5 - PROVIDE ANY ADDITIONAL INFORMATION THAT YOU BELIEVE MAY BE PERTINENT TO THE CONSIDERATION OF THIS REQUEST. (USE A SEPARATE SHEET IF NECESSARY.)

I HEREBY AFFIRM THAT ALL OF THE STATEMENTS AND INFORMATION CONTAINED IN OR FILED WITH THIS ADMINISTRATIVE ADJUSTMENT ARE TRUE AND CORRECT. I FURTHER UNDERSTAND THAT OPPOSITION TO THIS REQUEST COULD RESULT IN THE ZONING ADMINISTRATOR REQUIRING THIS REQUEST TO GO BEFORE THE BOARD OF ZONING APPEALS USING THE STANDARD APPEAL PROCESS. UNDER ANY EVENT, THE FILING FEE FOR THIS ADMINISTRATIVE ADJUSTMENT WILL NOT BE REFUNDED.

DATE

SIGNATURE OF APPLICANT

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, _____.

MY COMMISSION EXPIRES:

NOTARY PUBLIC