

Application for a Variance

Clay County Board of Adjustment

Zoning File No. _____

Date _____

Filing Fee: \$100.00

Application is hereby made by _____

(Present address)

Phone No. _____ Mobile Phone _____

The premises affected are located at _____

Zone District _____ Township _____

Legal Description of Property _____

It is a request for a variance relating to the

- use
- area
- frontage
- yard

or _____ provisions of the Ordinance.

Has any previous application or appeal been filed in connection with these premises? _____

What is the applicant's interest in the premises affected? _____

What is the approximate cost of the work involved? _____

Describe specifically the variance(s) you are requesting _____

Describe specifically what is unique, special or different about your property or buildings that are not present in other properties or buildings in your district _____

Describe what right under the ordinance you would lose that others in your district have under the ordinance if the ordinance was literally applied to you _____

Give the reasons that the special conditions and circumstances do not result from your actions _____

Tell why granting the variance will not allow you any special privileges that is denied by this Ordinance to other lands, structures, or buildings in Clay County _____

List or describe any other information that will be important in considering your application _____

Please include the following attachments:

1. Plot Plan
2. Ground Plan and Elevations
3. A list of property owners within 500 feet of the exterior limits of the property involved in this appeal, together with addresses of same.

Members of the Boards and the Zoning Officer may stop and view the property where the variance is requested. Filing this application will be considered permission for them to enter the property.

Date: _____

Signature(s) of Applicant(s)