

- Check Appropriate Item(s):
- Amendment to Zoning Map
  - Zoning Text Amendment
  - Special Use
  - Variance
  - Appeal of Administrative Decision

Office Use Only:

Date Received: \_\_\_\_\_

Application Number: \_\_\_\_\_

Fees Received: \_\_\_\_\_

**Part 1** – to be completed by **ALL** applicants

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**1-A Identification of Property** – For zoning text amendments, this is the property in which the applicant has an interest, which will be affected by the text change. For all other applications, it is the land, which is covered by the application.

- 1) Number and Street: \_\_\_\_\_
  - 2) Present Zoning: \_\_\_\_\_ 3) Acres: \_\_\_\_\_
  - 4) Legal Description of Property (Omit for zoning text amendment) – Attach if necessary.  
\_\_\_\_\_
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**1-B Property** – (Omit for zoning text amendments)

- 1) The deed restrictions, covenants, trust indentures, etc. on said property are as follows (or copy attached); if NONE, so state: \_\_\_\_\_  
\_\_\_\_\_
  - 2) a) Has this property or any part thereof ever been considered for Variance, Special Use, Appeal of Administrative Decision or Amendment to the Zoning District Map before?  
 YES  NO  
 b) Date: \_\_\_\_\_ c) Former Application No. \_\_\_\_\_  
 d) What was the disposition of the case? \_\_\_\_\_  
 \_\_\_\_\_  
 e) Former Applicant Name: \_\_\_\_\_  
 Former Address: \_\_\_\_\_  
 Former Phone: \_\_\_\_\_
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**1-C Identification of Applicant** – All applicants must have standing (an interest in property that will be directly affected by requested action)

- 1) Applicant Information:  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_
- 2) Agent Information (if any):  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_
- 3) Owners of all property included in this application (omit for zoning text change):  
*Name:* \_\_\_\_\_  
*Address:* \_\_\_\_\_  
*Phone Number:* \_\_\_\_\_  
*Name:* \_\_\_\_\_  
*Address:* \_\_\_\_\_  
*Phone Number:* \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

- 4) If applicant is a Land Trust or Partnership or if the subject property is owned or controlled by a Land Trust or Partnership, List name and interest of **ALL** Land Trust Beneficiaries or Partners and attach evidence that the person submitting the application on behalf of the Land Trust or Partnership is authorized to do so.

Trustee/Partner Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Interest: \_\_\_\_\_

Beneficiary/Partner Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Interest: \_\_\_\_\_

Beneficiary/Partner Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Interest: \_\_\_\_\_

- 5) Does the applicant have a proprietary interest in the land or land improvements?  YES  NO (In the case of a zoning text amendment, this means at least one parcel of land is subject to the text change)

If YES, state interest and attach documentation: \_\_\_\_\_

If NO, state what interest otherwise qualifies the applicant to apply: \_\_\_\_\_

- 6) Names of the owners of improvement(s) on the property in this application if different from above: (Omit for zoning text amendment)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

- 7) If the applicant is a corporation, attach the evidence that the person submitting the application on behalf of the corporation is authorized to do so.

See Authorization letter dated \_\_\_\_\_.

**Part 2** – Complete **ONLY** portion(s) of Pages 3, 4 & 5 pertaining to your case. (as checked at top of Page 1)

**2-A Rezoning** – (Amendment to the zoning district map) – Applications for Amendments to the Zoning District Map are heard by the Planning Commission which makes a positive or negative recommendation to the Town Council. Only the Town Council has authority to grant or deny amendments to the Zoning District Map.

- 1) a) Existing Zoning: \_\_\_\_\_ b) Proposed Zoning: \_\_\_\_\_  
 c) Existing Use: \_\_\_\_\_  
 d) Proposed Use: \_\_\_\_\_
- 2) a) The following are submitted with this application:  
 Preliminary Site Plan  Rendering or Perspective  Other  
 b) Are there any land use intensity (LUI) requirements?  YES  NO  
 c) Attach brief justifying this request. This brief should include an analysis of how the rezoning application is supportive or not supportive of relevant goals, objectives, policies or programs in the Comprehensive Plan. (Staff will assist.)

**2-B Zoning Text Amendment** – Applications for amendments to the zoning text are heard by the Planning Commission, which makes a recommendation to the Town Council. Only the Town Council has the authority to change the zoning text, which is done by passing an amendment to the Town Code.

- 1) What section(s) of the Town Code is proposed to be amended? \_\_\_\_\_
- 2) What is the nature of the proposed change? \_\_\_\_\_
- 3) Attach the exact language suggested by the application to be added, deleted, or changed in the Town Code.
- 4) Attach a written statement, which justifies the proposed change. The statement should also identify potential positive and negative impacts (if any) of the proposed change to the applicant's property, nearby properties, and the entire community if the application is approved or if it is denied.

**2-C Special Use Request** – Special Use requests are heard by the Planning Commission, which makes a positive or negative recommendation to the Town Council. Only the Town Council has the authority to grant or deny a Special Use.

- 1) Are development plans submitted with this application? (Staff member will explain.)  YES  
 NO
- 2) Parking Requirements:  
 a) Proposed number of parking spaces to be provided: \_\_\_\_\_  
 b) Number of parking spaces required by Town Code: \_\_\_\_\_  
 c) Attach tabulation of total land area and percentage thereof designated for various uses  
 d) Are there any land use intensity (LUI) requirements?  YES  NO  
 If YES, attach data.
- 3) Estimated cost of proposed Special Use project:  
 a) Land: \$\_\_\_\_\_ Improvements: \$\_\_\_\_\_
- 4) Submit a brief justifying the reasons for this request. This brief should include an analysis of how the rezoning application is supportive or not supportive of relevant goals, objectives, policies or programs in the Comprehensive Plan. (Staff will assist.)

**2-D Variance Request** – Variances are granted or denied by the Zoning Board of Appeals (ZBA). Reversal of ZBA decisions may be secured only through the judicial system.

- 1) a) All information required may be shown on one sheet if appropriate.  
 b) Check characteristic(s) of the property preventing it from being used in accordance with the terms of the Town Code (Zoning Ordinance):  
 Too Narrow  Elevation  Soil

- Too Small                       Slope                               Subsurface
- Too Shallow                       Shape                               Other (Attach specifics)

- c) Attach a description and/or drawings of the item(s) checked, giving dimensions were appropriate.
- 2) Attach requirements for the appropriate zoning district from which relief is sought as described in the Town Code.
- 3) Attach a brief explanation how the above site zoning conditions prevent any reasonable use of the land under the terms of the Town Code (Zoning Ordinance).
- 4) a) To the best of your knowledge, can you affirm that the hardship described above was not created by an action of anyone having proprietary interest in the land after the zoning article or applicable part thereof became law?  YES  NO  
 b) If NO, explain why the hardship should not be regarded as self-imposed (self-imposed hardships are not entitled to variance).

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- c) Are the conditions on the property the result of other man-made changes (such as relocation of a road or highway, etc.)?  YES  NO  
 d) If YES, attach descriptions and maps where appropriate.  
 e) Do the above-described conditions of hardship for which this request for variance is filed apply only to this property? If YES, attach an explanation.  YES  NO

- 5) Which of the following modifications will allow a reasonable use of the land?  
 Change in the setback requirements     change in lot coverage requirements  
 Change in height requirements             change in area requirements  
 Other (attach description)

- 6) a) Attach description of proposed use.  
 b) Is proposed use permitted in the zoning district?  YES  NO  
 c) Will the granting of a variance in the form requested be in harmony with the general purpose and intent of the zoning article and district statement of intent and not be injurious to the neighborhood or detrimental to the public welfare?  YES  NO  
 d) Attach a brief elaborating on this last point.

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**2-E Appeal of Administrative Decision** – Administrative decisions are reviewed by the Zoning Board of Appeals (ZBA). Such administrative decisions may be reversed or sustained by the ZBA. Reversal of ZBA decision may be secured only through the judicial system.

- 1) Date of administrative decision leading to this appeal: \_\_\_\_\_
- 2) Attach a brief, which specifically states the decision the administrative official made, the reasons given for the decision and specifically what you are herewith appealing. Elaborate on the reasons for this request, and why the Zoning Board of Appeals in your opinion should overrule the administrative official's decision.

**Part 3** – To be completed by ALL applicants

**AFFIDAVIT** – This part of the application must be notarized. Do not sign until in the presence of a Notary Public.

1) To the best of my knowledge, I hereby affirm that all information in this application and any attached material and documents are true:

a) Signature of **applicant**: \_\_\_\_\_

b) Signature of **agent** (if any): \_\_\_\_\_

c) Date: \_\_\_\_\_ *Notary Seal*

2) a) Signed and sworn before me this: \_\_\_\_\_

b) Signature of **Notary**: \_\_\_\_\_