

DEVELOPMENT STANDARDS VARIANCE APPLICATION

Development Standards Variance Applications will not be accepted unless the following four items are included with your application.

Complete Application Requirements

- A Completed Application – Sections 1 through 6 must be completed and signed
- Applicable filing fee (check payable to the Allen County Treasurer) \$ _____
(If mailing application, please mail to the address below)
- Detailed Site Plan (please see Site Plan Example supplement for specific inclusion information)
- Copy of most recent Recorded Deed with Legal Description

*****This application will be placed on the next applicable public hearing agenda when all completed application requirements have been submitted.*****

**Section 1:
Request**

Request (Specific Description) _____

Location _____ City _____ Zip _____
Renewal: Yes No N/A If yes, most recent petition number _____
Septic: Yes No

**Section 2:
Applicant**

Applicant _____
Address _____
City _____ State _____ Zip _____ Telephone _____
E-mail _____

**Section 3:
Property Owner**

Current Property Owner _____
Address _____
City _____ State _____ Zip _____ Telephone _____
E-mail _____

**Section 4:
Applicant's Representative**

Applicant's Representative _____
Address _____
City _____ State _____ Zip _____ Telephone _____
E-mail _____



The Board of Zoning Appeals may consider development standards variances pursuant to IC 36-7-4-918.5. The Board must make a written determination that the request meets the three following criteria (described as legal tests) in order for the request to be approved. Provide your responses for consideration by the Board and Hearing Officer in review of your application:

**Section 5:
Legal Tests Questionnaire**

1. How the approval will not be injurious to the public health, safety, morals, and general welfare of the community;

2. How the use and value of the area adjacent to the property included in the variance will not be affected in a substantially adverse manner;

3. How the strict application of the terms of the Zoning Ordinance will result in practical difficulties in the use of the property;

Please provide your responses for consideration by the Board, Hearing Officer, and Staff in review of your application. If any information request is not applicable to your project, please write "N/A" (not applicable) next to the question:

**Section 6:
Proposed Development Information**

1. Are there other similar development situations to your request in the nearby area? (i.e. front porch as close to the road, other signs of this size, etc.). If so, please provide addresses and similarities:

2. What will be the effect on the use and value of adjacent properties?

3. What alternative plans do you have if this request is not approved?



4. Expected time to complete the proposed development: _____
5. Is this property subject to:
 Deed restrictions and/ or covenants: Yes No
 An active neighborhood association: Yes No
 • If yes, does this proposal conflict with any of these: Yes No

YOU ARE WELCOME TO SUPPLY COPIES OF ANY ADDITIONAL INFORMATION THAT MAY CLARIFY AND SUPPORT YOUR REQUEST OR IF ADDITIONAL SPACE IS NEEDED TO SUPPLEMENT THE ABOVE INFORMATION.

I/We understand and agree, upon execution and submission of this application, that I/We agree to abide by all provisions of the City of Fort Wayne Zoning Ordinance or the Allen County Zoning Ordinances (whichever is applicable to the property), as well as all procedures and policies of the City of Fort Wayne Board of Zoning Appeals or the Allen County Board of Zoning Appeals. In addition, I/We acknowledge that if the zoning board approves my request that the board may impose certain conditions of approval and/or impose a written commitment as part of the zoning board's decision. I/We also acknowledge that, as the applicant, I have the burden of providing evidence showing compliance with the applicable legal criteria and, depending on the circumstances, the zoning board may or may not approve my request. I/We affirm that the above information is true and accurate and that if any information submitted by me/us is false or inaccurate, then zoning board may deny my request.

 (printed name of applicant) (signature of applicant) (date)

 (printed name of all current property owners) (signature of all current property owners) (date)

I/WE HEREBY AUTHORIZE AND CONSENT TO THE ON-SITE INSPECTION OF THE PROPERTY SUBJECT TO THIS ZONING APPLICATION BY THE DEPARTMENT OF PLANNING SERVICES FOR PURPOSES OF VERIFYING THE INFORMATION IN THIS APPLICATION AND FOR PURPOSES OF DETERMINING COMPLIANCE WITH THE APPLICABLE ZONING ORDINANCE.

 (printed name of applicant) (signature of applicant) (date)

 (printed name of all current property owners) (signature of all current property owners) (date)

Office Use Only – Do Not Fill Out Information Below this Line

Board of Zoning Appeals Hearing Officer

AC Planning Jurisdiction FW Planning Jurisdiction _____ Planning Jurisdiction

Payment Type: Cash Check Credit Card

Check #/Credit Card Approval #/Cash Amount: _____ **Receipt #:** _____

Historic District: Yes No Floodplain: Yes No AOD: Yes **District:** _____ No

Zoning: _____ Neighborhoods: _____

Received: _____ Hearing Date: _____ Petition No.: _____

