



CITY OF NEW ALBANY, INDIANA
NEW ALBANY CITY PLAN COMMISSION
NEW ALBANY BOARD OF ZONING APPEALS
SCOTT B. WOOD, DIRECTOR

Jeff M. Gahan, Mayor

VARIANCE APPLICATION REQUIREMENTS

Fee: \$150.00 +\$10.00 (sign)

In order for the staff of the New Albany City Plan Commission to expedite your request in a timely fashion, we ask that you follow these requirements:

1. The application and supporting materials must be submitted before the appropriate meeting deadline. **No exceptions.**
2. Once the application has been submitted with the required application processing fee, the staff will review the application at the next staff meeting (every Wednesday at 3:00 p.m.) to verify that all the required items in the checklist have been included. All items on the checklist provided must be submitted with the application or the request will not be assigned a Docket number. If items are missing, the applicant will be notified of the deficiency and the application will be held until the following month's meeting to allow the applicant time to submit those materials. If the applicant fails to submit the required items prior to the second deadline, a new application, including a new fee, will need to be submitted.
3. When the application is deemed complete by the staff, the request will be assigned a Docket number and will be placed on the appropriate agenda, and the applicant will be notified of that fact. At that time, the remaining application fee will be due, and the public hearing signs will be issued (as applicable).

**All Fees Are
NON- REFUNDABLE**

Application Number _____

Docket Number _____

VARIANCE

Docket Number: _____

Fee: \$150+\$10 sign fee [\$160]

Date Filed: _____

THE HONORABLE JEFF M. GAHAN, MAYOR, CITY OF NEW ALBANY, INDIANA
City Plan Commission and Board of Zoning Appeals
142 East Main Street, Suite 200
New Albany, Indiana 47150-3586
Phone: 1(812)948.5327 + Website: www.cityofnewalbany.com

Application for: **Use Variance, or**
 Development Standards Variance, or
 Use and Development Standards Variances

156.145 BOARD OF ZONING APPEALS.

(H) Powers and duties; variances.

(1) To authorize upon appeal in specific cases such variances from the terms of this chapter as will not be contrary to public interest, where owing to special conditions, a literal enforcement of the provisions of this chapter will result in unnecessary hardship, and so that the spirit of this chapter shall be observed and substantial justice done.

(2) The applicant shall have the burden of proof in establishing the right to a variance.

(3) In reaching its decision on a variance application, the Board shall follow the provisions of Indiana Code 36-7-4-918.4 and 36-7-4-918.5, as applicable.

(4) The Board may prescribe any safeguard that it deems to be necessary to secure substantially the objectives of the regulations and provisions to which the variance applies.

Statutory Reference: see *Indiana Code 36-7-4-918.4 and 36-7-4-918.5*

SECTION ONE:

1.0 Address of Property: _____

1.1 Plat Number: _____ On Lot(s) Number: _____

1.2 Key Number: ----.-

1.3 Tax Identification Number: --

SECTION TWO:

2.0 Name of Applicant: _____

2.1 Applicant's Address: _____
Street City State Zip

2.2 Applicant's Daytime Phone: _____

2.3 Applicant: OWNS LEASES OPTIONS the property for the variance

SECTION THREE [Complete if the applicant does not own the property]:

3.0 Owner of Property: _____

3.1 Owner's Address: _____
Street City State Zip

3.2 Owner's Daytime Phone: _____

SECTION FOUR:

4.0 The Property is Zoned: _____

4.1 Size of the Property (in acres): _____

4.2 Lot Frontage Dimension (in feet): _____ Lot Depth Dimension (in feet): _____

SECTION FIVE:

5.0 What is the current use of the property?

5.1 I hereby make application for a variance to permit:

5.2 What is the proposed use of the property?

5.3 [Answer this section only if you are seeking a **Land Use** Variance.]

How does the proposed variance meet the following criteria?

(5.3.1) The approval will not be injurious to the public health, safety, morals, and general welfare of the community.

(5.3.2) The use and value of the area adjacent to the property included in the variance will not be affected in a substantially adverse manner.

SECTION FIVE:

(5.3.3) The need for the variance arises from some condition peculiar to the property involved.

(5.3.4) The strict application of the terms of the zoning ordinance will constitute an unnecessary hardship if applied to the property for which the variance is sought.

(5.3.5) The approval does not interfere substantially with the comprehensive plan adopted under the 500 series of this chapter.

5.4 [Answer this section only if you are seeking a **Development Standards** Variance.]

How does the proposed variance meet the following criteria?

(5.4.1) The approval will not be injurious to the public health, safety, morals, and general welfare of the community.

(5.4.2) The use and value of the area adjacent to the property included in the variance will not be affected in a substantially adverse manner.

(5.4.3) The strict application of the terms of the zoning ordinance will result in practical difficulties in the use of the property.

5.5 Has any other zoning application been previously filed on this property? YES NO

5.6 If YES, give Docket number, date, and describe:

5.7 Additional information:

SECTION SIX:

6.0 Plans prepared by: _____

6.1 Address: _____

6.2 Phone: _____

6.3 Acknowledgment:

By signing below, I acknowledge that the information provided by me is true and accurate to the best of my knowledge. In addition, by signing below, I hereby permit members of the New Albany Board of Zoning Appeals, as well as their staff, to enter onto the property for purposes of inspection. In continuance, I hereby state that I have provided a complete and accurate list of all adjacent property owners and their mailing addresses, (Exhibit I, attached), as recorded in the Floyd County Assessors Plats. Finally, by signing below, I acknowledge receipt of two (2) public hearing signs that I agree to post and maintain in **conspicuous places** on the property for the special exception **15 days prior to the public hearing**.

Printed name of **APPLICANT**

Signed name of **APPLICANT**

Printed name of **OWNER**

Signed name of **OWNER**

OFFICE USE ONLY - Do Not Write Below This Line

Board of Zoning Appeals Public Hearing Date: _____

Public Hearing Signs issued by: _____

Application Certified Complete by:

_____ Date: _____

The Board: Approved Approved with Conditions Denied Accepted Withdrawal

Adjacent Property Owners

1. Owner's Name(s) _____
Mailing Address _____

2. Owner's Name(s) _____
Mailing Address _____

3. Owner's Name(s) _____
Mailing Address _____

4. Owner's Name(s) _____
Mailing Address _____

5. Owner's Name(s) _____
Mailing Address _____

6. Owner's Name(s) _____
Mailing Address _____

7. Owner's Name(s) _____
Mailing Address _____

8. Owner's Name(s) _____
Mailing Address _____

If additional space is needed, please copy and attach separate page.