



City of New Albany, Indiana
City Plan Commission
Variance

142 East Main Street, Suite 200
New Albany, IN 47150
812-948-5327

www.cityofnewalbany.com

Date Stamp

Docket #: _____

Date Filed: _____

VARIANCE

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

- 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: _____

All fees are NON-REFUNDABLE

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1.2 Parcel Number: - - - - . -

SECTION TWO:

2.0 Name of Applicant: _____

2.1 Applicant's Address: _____
Street City State Zip

2.2 Applicant's 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 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.

(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.

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(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: _____
Street City State Zip

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. Finally, by signing below, I

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acknowledge receipt of two (2) public hearing signs that I agree to post and maintain **in conspicuous places** on the property for the Variance **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

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