



CITY OF LOWELL APPLICATION & CHECKLIST VARIANCE

STAFF USE ONLY

Date Application Submitted _____
 Date Accepted as Complete _____
 Case/Appeal Number _____
 Public Hearing Date _____

FEE: \$150.00

APPLICATION:

Fill out this form completely, supplying all necessary information and documentation to support your request.
Your application will not be placed on the Planning Commission agenda until this information is furnished.

GENERAL INFORMATION

Applicant _____
 Address: _____

Day Phone: _____
 Fax #: _____

Representative _____
 Address: _____

Day Phone: _____
 Fax #: _____

Property Owner: _____
 Address: _____

Day Phone: _____
 Fax #: _____

Indicate where correspondence should be sent:

_____ Applicant
 _____ Representative
 _____ Owner

BUILDER

Builder Name _____
 Address: _____

Day Phone: _____
 Fax #: _____

Date structure was built (if applicable): _____

DESCRIBE PROPOSED PROJECT IN DETAIL (Attach to application)

Note: Applicant must describe in detail the amount of variance being requested, as well as the square footage of the building or lot which is in violation of setbacks or bulk and area requirements.

PROPERTY DESCRIPTION

Site Address: _____

Attach legal Description of Property. (May be found on deed or current survey of property.)

Building size in square feet: Existing _____ Proposed _____

Hours of operation (if applicable) _____

Number of employees _____

Indicate the number of patrons, clients, children, customers, etc. anticipated _____
Average per day _____ Peak hour _____

PARKING

Number of required parking spaces. _____ Number of proposed parking spaces. _____

FINANCIAL INTERESTS

The following entities and / or people have financial interest in this project:

APPLICANT / REPRESENTATIVE: I certify under penalty of perjury that the foregoing statements and answers herein made, all data, information and evidence herewith submitted are in all respects, to the best of my knowledge and belief, true and correct. I understand that submittal of incomplete, incorrect or false information is grounds for invalidation of the application. I understand that the City may not approve my application or may set conditions on approval.

_____ Date: _____

PROPERTY OWNER/AUTHORIZED AGENT: I certify under penalty of perjury that I am the owner of the property that is the subject of this application and that I have read this application and consent to its filing. (If signed by the authorized agent, a letter from the property owner must be provided indicating that the agent is authorized to act on his/her behalf.)

_____ Date: _____

Checklist:*

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Completed application form. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Payment of application fee \$150.00 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Notification to all property owners within 300 feet of subject property adjacent to the exterior boundaries, including across streets and alleys. Notice shall be by certified mail, return receipt requested, to each property owner from a list certified by a licensed abstract company. A copy of the letter sent to all property owners and the certified list shall be filed with the application. The signed return receipt requested cards (PS form 3811), any letters returned as undeliverable, and the certified mail receipt (PS form 3800) stamped by the Post Office for all cards and letters not returned shall be given to the planning department by the Wednesday preceding the hearing date. Letter of notification can be obtained at the Planning Department, an electronic copy can be obtained via e-mail or hard copy will be given to applicant. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Assessor's parcel numbers for all adjoining property owner's along with a copy of the applicable assessor's parcel map showing subject parcels with property owner's names printed on the property that they own. |

- 5. Site plan drawn to scale, based on the deed or survey, showing all existing and proposed structures dimensioned from the structure to the property line and required setbacks.
 - 6. A copy of the deed or survey of the property. A survey may be required if the deed can't accurately be platted.
 - 7. Check one of the following:
 - A. Appeal for a variance from certain zoning requirements
 - B. Other variance.
 - 8. Written explanation of the appeal on the application form. (What is proposed?)
 - 9. A typed letter addressed to the chair of the Planning Commission demonstrating each of the following four criteria:
 - A. That special conditions and circumstances exist which are peculiar to the land, structure or building involved and which are not applicable to other land structures, or buildings in the same district.
 - B. That literal interpretation of the provisions of this ordinance would deprive the applicant of rights commonly enjoyed by other properties in the same district under the terms of this ordinance.
 - C. That the special conditions and circumstances do not result from the actions of the applicant.
 - D. That granting the variance requested will not confer on the applicant any special privilege that is denied by this ordinance to other lands, structures or buildings in the same district.
- Note: No non-conforming use of neighboring lands, structures or buildings in the same district, and no permitted or non-conforming use of lands, structures or buildings in other districts shall be considered grounds for the issuance of a variance.
- 10. If possible, submit photographs demonstrating where and why the variance is requested.
 - 11. Applicant shall provide one each of the following, vicinity map and site plan, on an 8.5"x11" sheet.

*** Applicant shall positively certify each item. Where "no" or "N/A" is checked, Applicant shall submit a written explanation why the item is not positively certified.**