



# **VARIANCE / APPEAL APPLICATION**

## **PROCESSING FEES**

Residential	\$300
Non-Residential	\$500
Appeals to the Board of Adjustment	\$400

## ***SUBMITTAL REQUIREMENTS***

- Completed Application
- Notarized signatures of applicant and property owner
- Letter of Intent
- Articles of Incorporation, Certificate of Incorporation, Articles of Organization, Corporate Charter, or similar
- Hard copy of Concept Plan (including a digital copy)
- Statement of Justification (used to determine if Findings of Fact can be made at public hearing)
- Hard Copy of Statement of Appraisal, if necessary (including a digital copy)

## ***PROJECT INFORMATION***

- Has work started on the project?  YES  NO
- If yes, did you obtain a building permit?  YES  NO
- Have you received a Notice of Violation for this project?  YES  NO
- Has this property been rezoned?  YES  NO

If yes to any of the above, please attach a copy of the document.

If property has been rezoned, please provide Petition Number \_\_\_\_\_

## ***TIMELINE / PROCEDURES***

The Board of Adjustment, which hears Appeals, meets on the fourth Thursday every month.

All of the submittal requirements must be met by the first day of the month before the Appeal is heard. For example, if you wanted to present your case to the Board of Adjustment on the 4th Thursday of March, you must complete the submittal requirements by February 1st.

The hearing is Quasi-Judicial in nature, which means there is no deliberation or communication before the hearing, as in a court case. See Section 310.080 of the UDO for more details.

You must demonstrate to the Board of Adjustment that the official interpretation of the Planning Director is incorrect, and that your interpretation is correct based on facts and evidence alone.

# VARIANCE / APPEAL APPLICATION

GENERAL INFORMATION		
Project Name	Project Address	
Project Description	Parcel #	
Zoning District	Proposed Use	
Total Acres	Impervious Area	
PROJECT CONTACT		
Name/Company	Address	
Phone	Email	
Signature	Date	
PROPERTY OWNER'S CERTIFICATION		
Name	Address	
Phone	Email	
Signature	Date	
PUBLIC NOTARY		
Notary Name	Notary Seal	Notary Date

# APPELLANT'S STATEMENT

I, \_\_\_\_\_ hereby appeal the Board of Adjustment from the following adverse decision of the Town of Indian Trail Planning Director:

---

---

1. What UDO section numbers do you allege that were applied in error? Please list each section, and the requirement.

Item	UDO Section	Requirement
<i>Example</i>	<i>810.140 Landscaping Adjacent to Buildings</i>	<i>3 foot landscape buffer required along facades</i>
<b>A</b>		
<b>B</b>		
<b>C</b>		

2. Please describe why you feel the UDO sections above were applied in error. Explain what you feel the appropriate interpretation would be.

(A) UDO Section \_\_\_\_\_

---

---

(B) UDO Section \_\_\_\_\_

---

---

(C) UDO Section \_\_\_\_\_

---

---