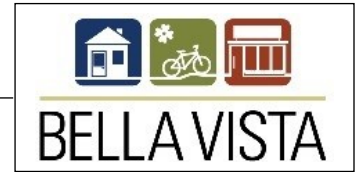


# Minor Modification Zoning Variance Application Package

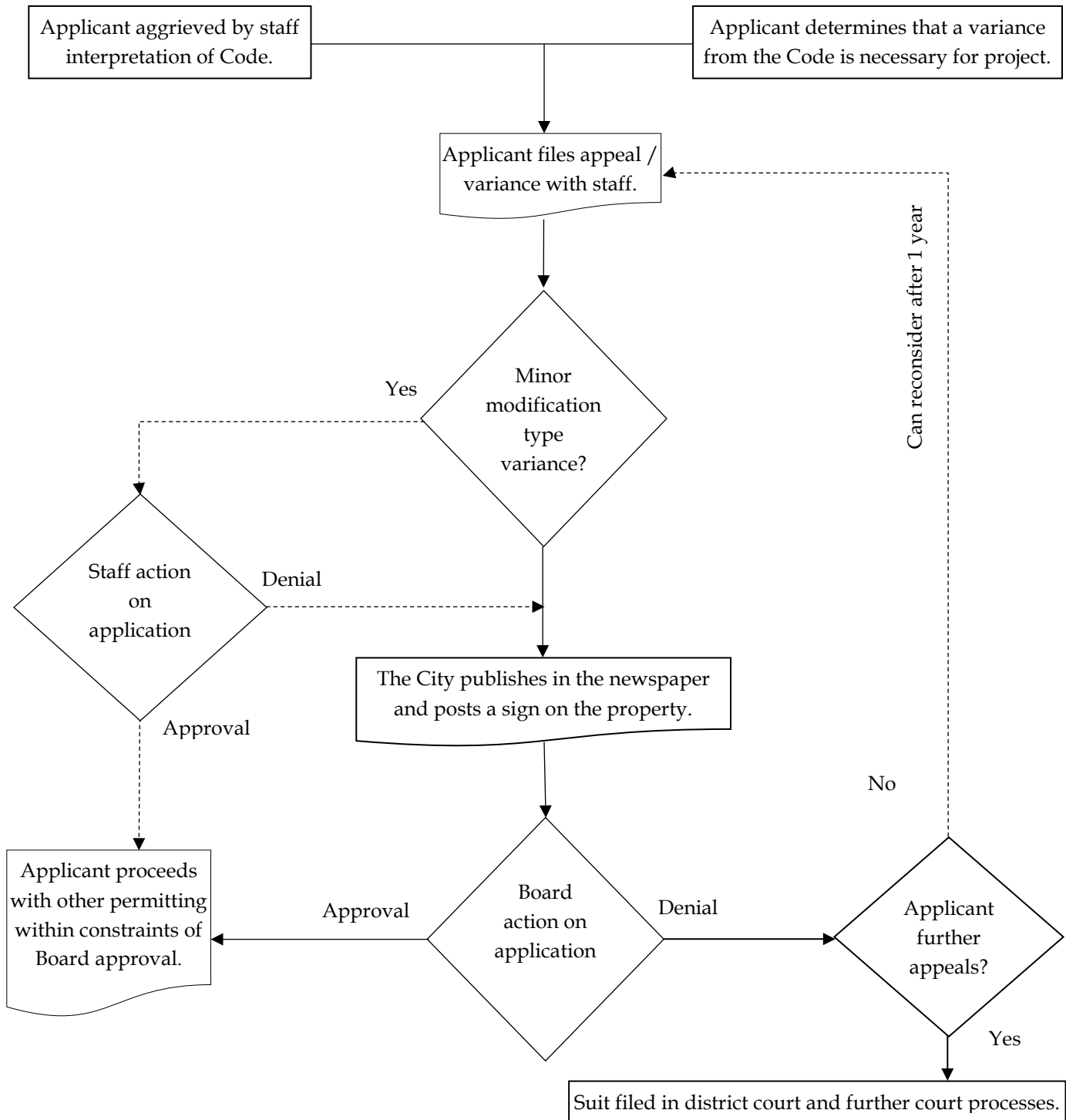


Zoning Variance Appeals Process ..... 2

Zoning Variance Application ..... 3

Please fill out the Application completely, supplying the necessary information and documentation to support your request. Your application will not be processed until the application is completed and the required legible documentation is provided.

# Minor Modification Zoning Variance Appeals Process



# Minor Modification Zoning Variance Application



*Fee: \$25.00 per request*

**PRIMARY CONTACT** (select one):

Applicant / Agent

Owner

## PROPERTY INFORMATION

Property Address:		Parcel #:	
Lot:	Block:	Subdivision:	Current Zoning:

## OWNER INFORMATION

**OWNER CERTIFICATION:** By my/our signature below, I/we certify under penalty of perjury that I am/we are the owner(s) of the property that is the subject of this application. I/we have read this application and consent to its filing. Further, I/we authorize the agent listed below to represent me/us in proceedings with the City of Bella Vista regarding this application. *(See reverse for additional acknowledgements)*

Name:		Owner Signature:	
Mailing Address:		City:	State:      Zip:
Phone:		Email:	

## APPLICANT / AGENT INFORMATION

**APPLICANT / AGENT ACKNOWLEDGEMENT:** By my signature below, 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 incorrect or false information is grounds for invalidation of application completeness, determination, or approval. I understand that the City might not approve what I am applying for, or might set conditions on approval. *(See reverse for additional acknowledgements)*

Name:		Applicant/ Agent Signature:	
Mailing Address:		City:	State:      Zip:
Phone:	Phone:	Email:	

## APPLICATION CHECKLIST

<input type="checkbox"/>	1. A completed application with appropriate fee. Applications will not be processed unless all of the required information is provided, including the items below.
<input type="checkbox"/>	2. Scaled drawing showing the requested variance along with all relevant information, including the exceptional condition or the situation of the property which causes the exceptional practical difficulty or undue hardship for which relief is being sought.
<input type="checkbox"/>	3. Any additional information that conveys the exceptional hardship on the property including photos, maps, etc.

## FOR OFFICE / REVIEW USE ONLY

Application Date:	How Paid: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Plastic	Approved:
Reviewer:	Permit Fees:	File #:
Permit #:	Approval/Disapproval Date:	Receipt #

## MINOR MODIFICATION REQUEST INFORMATION

If your request does not fall into one of the categories below per Section 109-42(d) of the Municipal Code, then it must be submitted as a Zoning Variance to the Board of Zoning Adjustment.

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | 1. Parking in C-1, C-2, C-3, C-4, I-1, and I-2 may be reduced by up to 10%.   |
| <input type="checkbox"/> | 2. Height of a building may be increased up to 10%.   |
| <input type="checkbox"/> | 3. In residential zoning districts, side building setbacks may be reduced by 2' so long as a minimum of 10' of separation is maintained between all structures. The roof line edges are included in this minimum separation.  |
| <input type="checkbox"/> | 4. In residential zoning districts, front building setbacks may be reduced so long as a minimum of 20' is maintained between the right-of-way and the closest point of the structure to provide for adequate vehicle parking. |

Minor Modification Review Criteria	Justification of Minor Modification Request
1. Explain what special circumstances apply to the property such as size, shape, topography, location, or surroundings.	
2. Explain how this minor modification will not be detrimental to the public health, safety, or welfare or be injurious to other property or improvements in the vicinity and in the same zoning district in which the property is located.	
3. Explain how the minor modification is in conformity with the intent and purpose of the regulations.	

**The minor modification does not, in any way, alter the applicant's obligation to comply with other applicable statutes, ordinances, laws, or regulations.**

## ACKNOWLEDGEMENTS

- |   |       |
|---|-------|
| 1. <b>Fees:</b> The fee for any minor modification of the zoning code is non-refundable.  |       |
| 2. <b>Precedents.</b> The granting of a minor modification is not grounds for granting other minor modifications for the same or differing purposes.  |       |
| 3. <b>Burden of Proof.</b> The applicant bears the burden of proof and must support each of the required findings.  |       |
| 4. <b>Exercise of Approval.</b> A minor modification must be exercised within one hundred twenty (120) days from the date of approval or the minor modification becomes null and void.  |       |
| 5. <b>Revocation.</b> The Director of the Department of Community Development Services may revoke a minor modification if: <ul style="list-style-type: none"> <li>a. The grantee has not substantially exercised the rights granted by the minor modification;</li> <li>b. The minor modification was obtained by misrepresentation or fraud;</li> <li>c. The applicant ceases or suspends work on the improvements authorized pursuant to the minor modifications for six (6) or more consecutive months;</li> <li>d. The improvement authorized pursuant to the minor modification violates any applicable statute, ordinance, law, or regulation;</li> <li>e. The improvement permitted by the minor modification is detrimental to the public health, safety, or welfare, or constitutes a nuisance.</li> </ul> |       |
| Owner / Agent Signature:  | Date: |