

VARIANCE APPLICATION – BOARD OF ADJUSTMENT

City of Duquesne, Missouri

Applicant shall submit a sketch, in duplicate, drawn to scale and showing the lot or lots included in the application, the structures existing thereon and the structures contemplated necessitating the variance requested. All appropriate dimensions should be included and any other information which would be helpful to the Board of Adjustment in consideration of the application.

Date: _____

Filing Fee: \$600.00

Owner: _____ Phone: _____

Address: _____ Fax: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Applicant: _____ Relationship to Owner: _____
(person to whom all correspondence will be sent)

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Fax: _____

Property Location: _____

Legal Description: _____

(attach separate sheet if necessary)

Adjacent Zoning and Land Use:	Existing Land Use	Zoning
North	_____	_____
South	_____	_____
East	_____	_____
West	_____	_____

Present Use of Property: _____

Proposed Use of Property: _____

Please indicate below the extent to which the following standards are met, in the applicant's opinion. Each of the following conditions must be met. Please attach a separate sheet if necessary.

1. UNIQUENESS: **Yes** ____ **No** ____

The variance requested arises from such condition which is unique to the property in question and which is not ordinarily found in the same zone or district and is not created by an action or actions of the property owner or applicant.

2. ADJACENT PROPERTY: **Yes** ____ **No** ____

The granting of the permit for the variance will not adversely affect the rights of adjacent property owners or residents.

3. HARDSHIP: **Yes** ____ **No** ____

The strict application of the provisions of the zoning regulations of which the variance is requested will constitute unnecessary hardship upon the property owner represented in the application.

4. PUBLIC INTEREST: **Yes** ____ **No** ____

The variance desired will not adversely affect the public health, safety, quality of life order, convenience, prosperty or general welfare.

5. SPIRIT AND INTENT: Yes ____ No ____

The granting of the variance desired will not be opposed to the general spirit and intent of the zoning regulations.

6. MINIMUM VARIANCE: Yes ____ No ____

The variance requested is the minimum variance that will make possible the reasonable use of the land or structure.

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT; THAT I HAVE READ AND UNDERSTAND THE PROCEDURES, ORDINANCES AND REQUIREMENTS ASSOCIATED WITH THE APPLICATION AND REVIEW PROCESS. I ALSO UNDERSTAND THAT I WILL BE RESPONSIBLE FOR THE COST OF ANY REQUIRED TRANSCRIPT OF ANY REQUIRED HEARING. FURTHERMORE, I ACKNOWLEDGE THAT THE CITY MAY REQUIRE ADDITIONAL INFORMATION AS DEEMED NECESSARY.

Owner's Signature

Applicant's Signature (if different)

Return Form to: City Clerk at City Hall

Office Use Only:	Date Received: _____	Hearing Date: _____
	Date Advertised: _____	Date Property Posted: _____
	Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Filing Fee: _____