

Application for Variance from Development Standards

City of Madison
Office of Planning, Preservation, & Design
101 W Main St
Madison, IN 47250
(812) 265-8300

Application Fee \$ 35.00
Ad Fee (for Legal Notice) \$ 15.00
Recording Fee \$ 25.00
Total Due \$ 75.00

Purpose: Per the City of Madison Zoning Ordinance, the Board of Zoning Appeals shall approve or deny variance from development standards from the terms of the Zoning Ordinance. The Board may impose reasonable conditions as a part of its approval. A variance may be approved only upon a determination by the Board.

This application must be filed at least 15 days prior to scheduled meeting to be eligible for consideration at that meeting. Actual deadlines vary due to holidays, office business hours and operating schedule, media publishing deadlines, etc. Deadlines are published publicly and can also be provided by contacting the Planning Office.

APPLICANT INFORMATION

Name: John Heitz
Street: 902 Michigan Rd.
City: Madison State: IN Zip: 47250
Phone (Preferred): 812-701-1344
Phone (Alternate): _____
Email: REDPEPPERCATER@gmail.com

OWNER INFORMATION (IF DIFFERENT*)

Name: _____
Street: _____
City: _____ State: _____ Zip: _____
Phone (Preferred): _____
Phone (Alternate): _____
Email: _____

*** If Applicant is not Owner, MUST submit documentation from owner authorizing applicant on their behalf.**

PROPERTY FOR WHICH A VARIANCE IS REQUESTED

Address and/or Legal Description of Property: 708 E. 2ND ST

Zoning Classification: RES.
HDR

Description of Existing Use: RESIDENCE

Description of Proposed Use: "

List sections of the Zoning Ordinance for which a variance is requested: Adding 10' to the back end of the house

Describe why a variance is requested: We want to add the additional 10' to make the bedroom larger

Per the City of Madison Zoning Ordinance, a variance shall not be granted unless the Board makes specific findings of fact based directly on the particular evidence presented to it, which support conclusions that the standards and conditions has been met by the applicant.

Provide a detailed Narrative statement demonstrating that the requested variance conforms to the following standards. Respond to each question below with Yes/No and why. Use additional pages if necessary.

1. Will this variance be injurious to the public health, safety, morals, and general welfare of the community?
No, It will be SAFER. The upgrades to the property will add to the value of the Neighborhood
2. Will the use and value of the area adjacent to the property included in the variance will be affected in a substantially adverse manner?
No it will not. Right now there is an old unattractive Eye Sore.
3. Did the need for the variance arises from some condition peculiar to the property involved?
YES WE NEED Additional Room to the back bedroom
4. Will 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.
No
5. Does the approval of this application not interfere substantially with the Comprehensive Plan?
IF not approved it would greatly interfere with our Plan.
6. Are there any special conditions and circumstances exist which are peculiar to the land, structure, or building involved and which are not applicable to other lands, structures, or buildings in the same district?
No
7. Will 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 the Zoning Ordinance?
No
8. Are special conditions and circumstances do not result from the actions of the applicant?
No! Although this sentence is confusing it's a fragmented sentence.
9. Will the variance requested confer on the applicant special privilege(s) that is denied by Zoning Ordinance 2016-19 to other lands, structures, or buildings?
No.

Include any other documents/information which you feel will aid the Board in making its determination.

Certified letters **MUST** be mailed to adjoining property owners (includes owners of real estate at corners, across streets, alleys or easements as well as others who may share a common boundary) at least ten (10) days prior to the meeting. The Planning Office can assist you in obtaining this information. Proof of the Certified Mail receipts and the corresponding returned green cards shall be given to the Planning Office at least one (1) working day prior to the scheduled meeting. The Board will not review the application unless these are received.

I certify that the information provided in this application is true and accurate to the best of my ability and I understand and agree to the Certified mail stipulations.

3/2/22
Date

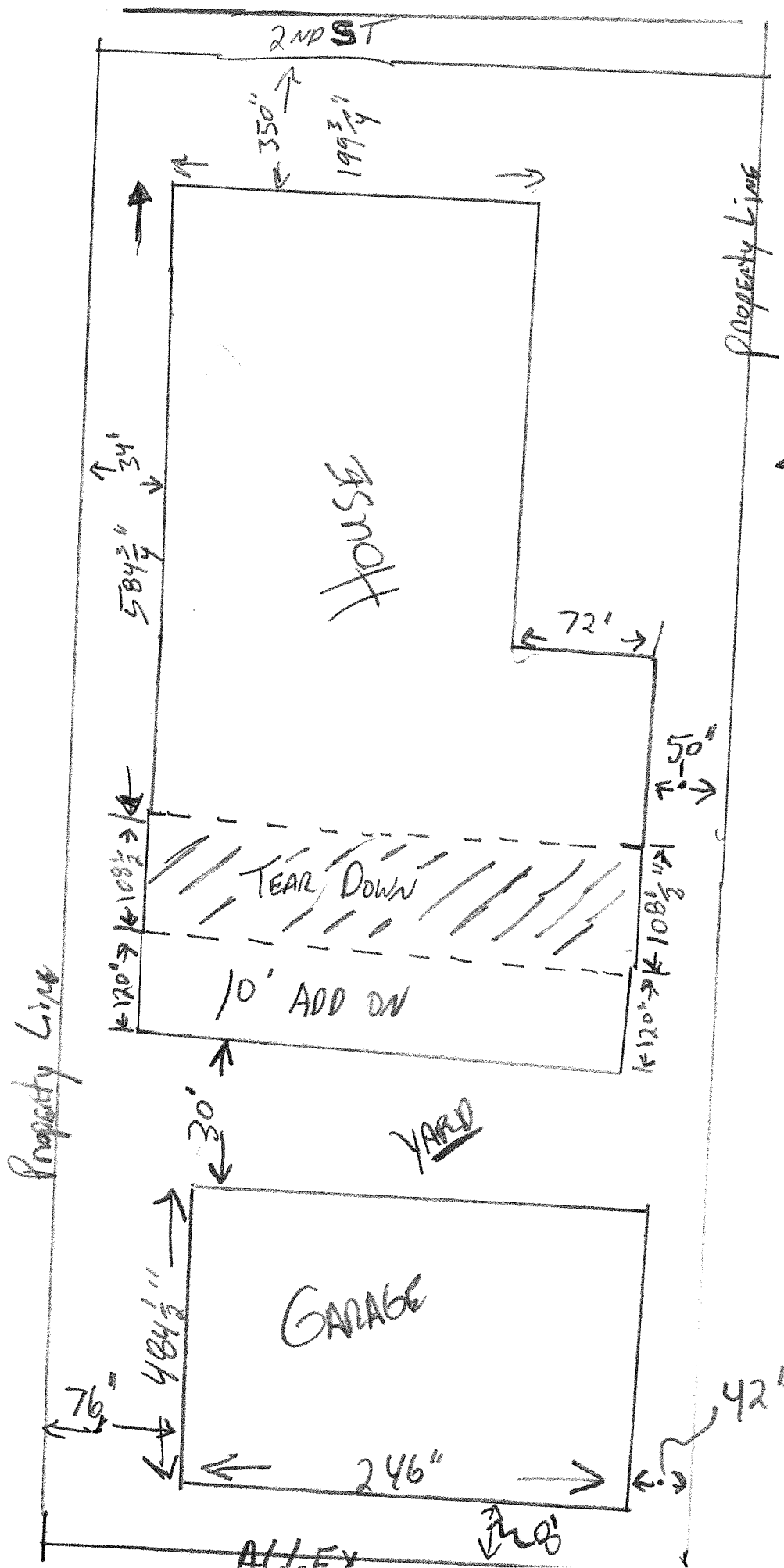
[Signature]
Signature of Applicant

Documentation Review (Completed by Planning Office)

- N/A Owner Authorization provided (if req'd)
- ☒ Narrative Statements completed
(Proposed Use & 1 – 7 above)
- ☒ Application is complete
- ☐ GIS Information to applicant and attached
- ☐ Certified Mail Receipts received (attach)
- ☐ Certified Mail Green Cards received (attach)

Staff Notes

COMPLETED BY PLANNING OFFICE		Meeting Information: Board of Zoning Appeals	
Application Accepted on:	<u>3/9/2022</u>	101 W Main St, Madison, IN 47250 – Council Chambers	
Application Accepted by:	<u>JOE PATTERSON</u>	Meeting Date:	<u>4/11/2022</u> Time: 6:30PM



(708 EAST 2ND)

SETBACKS

NORTH: 29'

EAST: 3'

WEST: 25'

SOUTH: 8'

