

City of Cape Canaveral
APPLICATION FOR VARIANCE

Date Filed _____ Fee Paid _____ \$250 Filing Fee is non-refundable
Description of Request: (Insure that the specific sections of the Zoning Ordinance that allow & support your request are noted). Attach separate sheet if necessary.

Address of request: _____

Legal Description: Lot(s) _____, Block _____, Subdivision _____,
Section _____, Township _____, Range _____.

STATEMENT OF FACT: State of Florida, County of Brevard

I, _____, being duly sworn, depose and say that:
____ I am the owner.
____ I am the owner(s) designated agent. (Attach notarized letter of authorization).

Owner(s) Name: _____
Address: _____
Home Phone: _____ Work Phone: _____ FAX: _____

All information, sketches and data contained and made part of this request, are honest and true to the best of my knowledge and belief.

Sworn to and subscribed before me
on this ____ day of _____, _____.

Signature of Applicant:

Notary Public, State of Florida

The completed request form and the \$250.00 filing fee must be files as follows: Requests for Variance, 14 days prior to the Planning & Zoning Board meeting. The Board of Adjustment meeting will be set after the request is heard by the Planning & Zoning Board.

FOR CITY USE ONLY

Notice of Public Hearing Published in Newspaper on _____
Notice to applicant be Certified Mail No. _____ on _____
Notice posted on Bulletin Board on _____
Notice posted on subject property on _____
Property owners w/ in 500 ft. notified on _____

VARIANCE APPLICATION WORKSHEET

This worksheet must be completed, legible, and returned, with all required enclosures referred to therein, to the Building Department; at least 14 days prior to the scheduled meeting to be processed for consideration by the Planning and Zoning Board for study and recommendation to the Board of Adjustments. You and your representative are required to attend the meetings and will be notified by certified mail of the date and the time of the meetings. The Planning & Zoning Board holds its regular meeting on the 2nd and 4th Wednesdays of every month at 7:30 P.M. in the City Hall Annex, 111 Polk Avenue, Cape Canaveral, Florida, unless otherwise stated. ALL OF THE FOLLOWING INFORMATION MUST BE SUPPLIED TO PROCESS THE APPLICATION.

1. See STATEMENT OF FACT (attach notarized letter of authorization if not actual owner)
2. PROPERTY ADDRESS OF REQUEST: (if address is not available, give general location)

3. COMPLETE LEGAL DESCRIPTION OF PROPERTY:

Lot: _____, Block: _____, Subdivision: _____

Parcel: _____, Section _____, Twp. _____, Rge. _____

4. Size of Subject Property (calculate acreage): _____
5. Ordinance Section under which Variance is being sought: _____
6. Current Zoning Classification of Subject Property: _____
7. Attach to this worksheet a letter giving a complete description of the Variance requested and any and all pertinent details and information.

8. VARIANCES ARE TO BE AUTHORIZED WHERE THEY ARE NOT CONTRARY TO THE PUBLIC INTEREST AND WHERE, DUE TO SPECIAL CONDITIONS, A LITERAL ENFORCEMENT OF THE TERMS OF THE ORDINANCE WOULD RESULT IN UNNECESSARY HARDSHIP. THE ORDINANCE SETS FORTH SPECIFIC CONDITIONS WHICH MUST ALL BE DEMONSTRATED BY THE APPLICANT BEFORE THE BOARD IS EMPOWERED TO GRANT THE VARIANCE. PLEASE ADDRESS EACH ONE IN WRITING. IF THE APPLICANT CAN NOT SATISFACTORILY ADDRESS ALL OF THE FOLLOWING, THIS SHOULD SERVE AS A PRELIMINARY INDICATION THAT THE APPLICATION MAY BE REJECTED.

THE CONDITIONS ARE AS FOLLOWS AND ITEMS (A) THROUGH (F) MUST BE ANSWERED IN FULL: (Ordinance 110-62)

- A. That special conditions and circumstances exist which are unique to the land, structure or building involved and are not applicable to other lands, buildings or structures in the same district.

- B. That literal interpretation of the provisions of the zoning ordinance would deprive the applicant of rights commonly enjoyed by other properties in the same zoning district and would work unnecessary and undue hardship on the applicant.

- C. That the special conditions and circumstances referred to in item (A) above do not result from the actions of the applicant.

- D. That granting the variance requested will not confer on the applicant any special privileges that are denied by the ordinance to other lands, structures or buildings in the same district.

E. That the reasons set forth in the application justify the granting of the variance, and that the variance, if granted, is the minimum that would make possible use of the land, building or structure.

F. That the granting of the variance will be in harmony with the general intent and purpose of the zoning code, will not be injurious to the neighborhood, or otherwise detrimental to the public welfare.

WHILE THESE CONDITIONS MAY SEEM UNDULY HARSH AND STRINGENT TO THE INDIVIDUAL APPLICANT, IT MUST BE REMEMBERED THAT THE ZONING ORDINANCE WAS ENACTED FOR THE BENEFIT OF THE COMMUNITY AS A WHOLE BE REQUIRING AN ORGANIZED AND CONTROLLED PATTERN OF THE COMMUNITY DEVELOPMENT.

IT SHOULD BE NOTED THAT THE DIFFICULTIES OR HARDSHIPS RELIED UPON MUST BE UNIQUE TO THAT PARTICULAR PROPERTY (E.G., PECULIAR LOT SHAPE) NOT GENERAL IN CHARACTER, SINCE DIFFICULTIES OR HARDSHIPS SHARED WITH OTHERS IN THE AREA GO TO THE REASONABLENESS OF THE ZONING GENERALLY, AND WILL NOT SUPPORT A VARIANCE. IF THE HARDSHIP IS ONE THAT IS COMMON TO THAT AREA, THE REMEDY IS TO SEEK A CHANGE OF THE ZONING CLASSIFICATION FOR THE NEIGHBORHOOD.

9. Attach a list of names and addresses of all property owners within 500 feet of subject property accompanied by a certified survey or portion of the tax assessors map showing boundaries of the attached property.

10. The following items or documents must be attached to this submittal.

- a. Notarized affidavit of all property owners.
- b. Check for the required fee.
- c. Map showing properties within 500 feet and a list of all property owners and addresses.
- d. Survey or portion of tax assessors map showing boundaries of subject property.
- e. Legal description showing metes and bounds of subject property.
- f. Copy of recorded deed of subject property.

11. THE UNDERSIGNED OWNER/AUTHORIZED AGENT AGREES THAT THIS APPLICATION MUST BE COMPLETED AND ACCURATE BEFORE CONSIDERATION BY THE CITY OF CAPE CANAVERAL PLANNING AND ZONING BOARD AND BOARD OF ADJUSTMENT.

APPLICANT SIGNATURE: _____

PRINT NAME: _____