

**ZBA Exception Application Check List:**

The following must be submitted prior to the application deadline. Otherwise, the application will be deemed incomplete and may result in unnecessary delays to your application: (Please ✓ when complete)

Detail in writing responses to the following:

\_\_\_ 1. An explanation of how the requested exception conforms to each of the required determinations set forth in each applicable section.

Following are the necessary determinations for an exception from the sign ordinance:

1. That the exception will not be detrimental to or cause undue hardship to the surrounding neighborhood and property owners, or to the public safety; and
2. That the exception is in keeping with the purpose of the zone district, sign code or fence ordinance, as the case may be; and
3. That the exception to be granted is one that will require the least modification to the prescribed regulations and the minimum variance that will accomplish the purpose; and
4. That the literal enforcement of the provisions of the ordinance will result in restrictions inconsistent with the purpose of the applicable section; and
5. For exceptions to the parking and loading requirements, the board shall find that, due to unique circumstances, a particular activity would not reasonably be expected to generate parking demand sufficient to justify the parking requirement; and
6. The required determination for telecommunications tower and facility exceptions are contained in Article V, Section 31-315(b) of the Code of Ordinances.

\_\_\_ 2. A site plan describing the property boundaries, the location of buildings, and the area for which the exception is being requested.

\_\_\_ 3. A complete list of the names and mailing addresses of all owners of record of all land within 185 feet of the perimeter boundaries of the property.

\_\_\_ 4. **To Be Completed by Customer Assistance Department**

Please note any delinquencies or items due:

Real Estate Taxes: \_\_\_\_\_

Personal Property Taxes: \_\_\_\_\_

Sewer Service Bills: \_\_\_\_\_

Weeds or Demolition: \_\_\_\_\_

Special Assessment: \_\_\_\_\_

Business Licenses: \_\_\_\_\_

Other City Debt: \_\_\_\_\_

Date completed: \_\_\_\_\_

Completed by: \_\_\_\_\_

Customer Services Representative