



Application for Variance
Filing Fee: \$400.00

It is the desire of staff to process your request for a variance in a timely manner. Please complete the application in full and provide the requested attachments to prevent any delay. You are encouraged to discuss your application with Planning Staff prior to submittal. Upon completion of a review by staff, the Board of Adjustment will consider and rule on your request during a formal public hearing. Five (5) concurring votes are required for the Board to pass any action.

Applicant Information

Representing Company:		
Contact Name:	Phone:	
Address:	Fax:	
City:	State:	Zip:
Email:		

Owner Information (if other than applicant)

Name:	Phone:	
Address:	Fax:	
City:	State:	Zip:
Email:		

Property for Consideration

Site Address:	Current Zone:
Legal Description:	

Nature of Request

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Fees

Application Filing Fee(s): Due at time application is submitted
 Advertising Fee: \$ 50.00
 Application Fee: \$350.00

Signature of Applicant(s)

	Date:
	Date:

Requirements for Granting a Variance

The following conditions (10-3-6(H)(1)(b)(iv) of the Zoning Ordinance) must be fulfilled before a variance can be granted by the Board of Adjustment. Showing that a variance is profitable or desirable for the owner and no harm will be done to others is not sufficient. Please explain how granting your request conforms to each of the requirements below:

[1] Undue hardship resulting for physical limitations (i.e. physical size, shape, topography, location, and/or surroundings) on development unique to the property upon which the variance is requested and such hardship is not generally applicable to other properties in the same zone.

[2] The hardship is not economic in nature and was not created by any action of the lot's owner or occupant.

[3] Granting the variance is not in conflict with the public interest nor creates a nuisance or potential harm to the neighborhood in which the lot is located.

Sketch Plan

Please attach a sketch of your proposal/plot plan in the requested format and with the following information:

1. Minimum size of 8½" x 11" drawn to scale.
2. Show north arrow and scale at which the plan is drawn (not to be less than 1"=30').
3. Perimeter and dimensions of the entire property including acreage/square footage.
4. Names and location of all bordering streets.
5. Identify the location of all easements and/or rights-of-way.
6. The use, location and dimension of all present and proposed structures and/or additions, including the distance from all structures to the property lines.
7. Square footage of all buildings or structures on the property involved.
8. If your request is to reduce required landscaping then provide location and square feet of provided landscaping areas. Landscape plans are required for new landscaping.
9. If your request is to reduce the required parking then provide the location, configuration, dimensions, number of provided off street parking stalls, drive aisles and access to parking stalls from the street.

Affidavit of Legal Interest (see attachment)

If you are representing the owner of the property in question, a notarized Affidavit of Legal Interest must accompany the application.

AFFIDAVIT OF LEGAL INTEREST

STATE OF IDAHO

COUNTY OF BONNEVILLE

}
} SS

I _____
Name

_____ Address

_____ City

_____ State

Being first duly sworn upon
Oath, depose and say:

Being the owner of record of the property described on the attached sheet, I grant permission to:

_____ Name

_____ Address

To submit the following application pertaining to that property, check all that applies:

- Preliminary Plat
- Final Plat
- Variance
- Conditional Use Permit
- Planned Unit Development
- Comprehensive Plan Map Amendment
- Annexation
- Rezone to _____

I agree to indemnify, defend and hold the City of Idaho Falls and its employees harmless from any claims to liability resulting from any dispute as to the statements contained herein or as to the ownership of the property which is the subject of the application.

Dated this _____ day of _____, 20_____.

Signature

SUBSCRIBED AND SWORN to before me the day and year first above written.

Notary Public for Idaho

Residing at

My Commission Expires: _____