

MIDDLESEX COUNTY

Department of Planning and Community Development
P.O. Box 428, Saluda, VA 23149
Phone: 804-758-3382 Fax: 804-758-0061

VARIANCE SUBMISSION REQUIREMENTS

In order to expedite the review of Variance applications, please be sure that all of the following items have been included in your Variance application. Please return this completed checklist with the application to assure that all items have been addressed. All Variance applications must adhere to the regulations found in the Middlesex County Zoning Ordinance.

- Completed variance application.
- Variance application fee of \$400.
- A sketch of the site showing the property lines, streets and roads, existing and proposed structures, water bodies, Chesapeake Bay Act features (if applicable) and variance requested.
- Any other information that the Zoning Administrator may reasonably determine to be necessary for the proper evaluation of the application.

As outlined in Article 20, Section 20-2-B of the Ordinance, the Board of Zoning Appeals shall not approve the Variance unless it finds:

- That the strict application of the ordinance will produce undue hardship approaching unconstitutional confiscation without compensation;
- That such hardship is not shared generally by other properties in the same zoning district and the same vicinity;
- That financial loss to the applicant is not the sole basis for the requested variance;
- That the hardship claimed is not self-inflicted, either deliberately or ignorantly;
- That the authorization of such variance will not be of substantial detriment to adjacent properties and that the character of the district will not be changed by the granting of the variance; and
- That the condition or situation of the affected property or the intended use of the property is not of such general or recurring nature as to make reasonable practicable the formulation of a general regulation to be adopted as an amendment to the ordinance.

CERTIFICATION:

I hereby certify that the attached plans and this completed application form contain all the required information for a Variance application in accordance with the Middlesex County Zoning Ordinance. I understand that the submission of incomplete or inaccurate information may delay the processing of this Variance application.

Applicant's Signature

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VARIANCE APPLICATION

OFFICE USE ONLY

Application #: _____

Variance Classification/Fee: Variance (\$400) Administrative Variance (\$100)

Tax Query: Current Delinquent

Reviewing Authority: _____ Hearing Date: _____

Decision: Approved Denied

Conditions/Comments: _____

Zoning Administrator Signature

Date

APPLICANT INFORMATION

Name: _____

Address: _____ City/State/Zip: _____

Phone: _____ Fax: _____

PROPERTY OWNER INFORMATION

Name: _____

Address: _____ City/State/Zip: _____

Phone: _____ Fax: _____

PROPERTY INFORMATION

Parcel Number(s): _____ E911/Street Address: _____

Magisterial District: _____ Zoning District: _____

Existing Land Use: _____ CBPA District: _____

VARIANCE REQUEST

The undersigned owner of the following described property applies for a variance from the provisions of Article _____,

Section _____ of the Zoning Ordinance of Middlesex County, Virginia.

Please answer the following questions:

1. Describe the variance requested. _____

2. Provide a narrative statement demonstrating that the requested variance conforms to the following standards:
- (A) The property was acquired in good faith and where by reason of the exceptional narrowness, shallowness, size or shape of the property at the time of the effective date of the Zoning Ordinance, or where by reason of exceptional topographic conditions or other extraordinary situation or conditions of such piece of property or of use or development of property immediately adjacent thereto, the strict application of the terms of the ordinance would effectively prohibit or unreasonably restrict the use of the property.
 - (B) That special conditions and circumstances do not result from the actions of the owner.

3. How would this variance affect other property in the area? _____

4. Describe why you cannot make other arrangements to comply with the Zoning Ordinance without a variance. _____

APPLICANT STATEMENT

I hereby certify that I have the authority to make the foregoing application, that the information given is complete and correct to the best of my knowledge, and that development and/or construction will conform with the regulations as set forth in the Middlesex County Zoning Ordinance as written and also with the description contained in this application.

Applicant's Signature (if not Property Owner)

Date

Applicant's Signature (if not Property Owner)

Date

PROPERTY OWNER(S) STATEMENT

I hereby certify that I/we own the above described property, that the information given is complete and correct to the best of my knowledge, that development and/or construction will conform with the regulations as set forth in the Middlesex County Zoning Ordinance as written and also with the description contained in this application, and that the above person(s), group, corporation or agent has the full and complete permission of the undersigned owner(s) to make application for a variance as set forth in the Middlesex County Zoning Ordinance as written.

Property Owner's Signature

Date

Property Owner's Signature

Date

CONDITIONS

1. This permit application is not valid unless all property owner(s) signatures are affixed and dated.
2. All permit application charges are nonrefundable, regardless of whether the permit application is approved or denied once submitted. All checks for payment should be made payable to Middlesex County.
3. Any approval of a variance is issued on the basis of plans and applications approved and authorizes only the use, arrangement and construction set forth in such approved plans and applications. Any deviations from the plans and applications submitted shall render an approved variance null and void.

APPLICANT STATEMENT

I hereby certify that I have the authority to make the foregoing application and that the information given is complete and correct to the best of my knowledge.

Applicant's Signature (if not Property Owner)

Date

Applicant's Signature (if not Property Owner)

Date

PROPERTY OWNER(S) STATEMENT

I hereby certify that I/we own the above described property, that the information given is complete and correct to the best of my knowledge, and that the above person(s), group, corporation or agent has the full and complete permission of the undersigned owner(s) to make application for an appeal as set forth in the Middlesex County Zoning Ordinance as written.

Property Owner's Signature

Date

Property Owner's Signature

Date

CONDITIONS

1. This permit application is not valid unless all property owner(s) signatures are affixed and dated.
2. All permit application charges are nonrefundable, regardless of whether the permit application is approved or denied once submitted. All checks for payment should be made payable to Middlesex County.