

### **Current Planning and Zoning Division**

18400 Murdock Circle Port Charlotte FL 33948-1094 Phone: (941) 743-1964 / Fax: (941) 743-1292 www.CharlotteCountyFL.gov

#### **Administrative Variance Application to the Zoning Official**

#### **Application Check List and Process:**

>	A sufficient application shall include:

- ☐ The completed **Application** with all the requested information provided.
  - A notarized Affidavit of Applicant.
  - ☐ If applicant is **not** the property owner a notarized **Property Owner's Consent** form must also be submitted.

    These affidavits are included in this application packet.
  - □ A current up to date **Survey** and complete **Legal Description** of the property must be included. A "<u>Digitally Signed</u> <u>and Sealed PDF</u>" of the **Survey** is required for all variance applications.
  - A **Concept Plan** of an appropriate scale showing the existing and proposed placement of structures, provisions for ingress and egress, off-street parking and loading areas, refuse and service areas, landscape buffers, required yards and other spaces. If the *Concept Plan* is larger than 11" x 17", 12 folded copies must be submitted.
  - □ A **Narrative** description of the request addressing all of the <u>Approval Criteria</u> in **Section 3-9-6.3(i)** in sufficient detail to provide a full and complete understanding of the request. A statement detailing the reasons for the request shall be part of the narrative.
  - □ **Supporting Evidence:** Any <u>supporting evidence</u>, such as, site plans, data, bathometric surveys, floor plans, building elevations, building cross sections, topography, or photographs.
  - ☐ The application fee for an <u>Administrative Variance</u> is \$175. Checks are to be made payable to <u>Charlotte County</u>

    Board of County Commissioners or **CCBCC**.

#### **Process**

- All applications will be reviewed for sufficiency by staff. The applicant will be notified in writing within ten days if the application is sufficient or insufficient. If insufficient the letter will state what is needed to make the application sufficient and complete.
- When the application is sufficient the application will be reviewed by the Zoning Official who will make their decision to approve, approve with conditions, or deny the requested administrative variance. If approved the Zoning Official will send a letter to adjacent property owners notifying them of the intention to grant the requested variance. Adjacent property owners will have 15 days to file a written objection and request a public hearing before the BZA.
- If there are any valid objections, then the application will be scheduled for a public hearing at the next available Board of Zoning Appeals meeting.
- If a public hearing is required before the Board of Zoning Appeals, the BZA will make the final decision.
- The applicant will receive a final decision letter as well as a copy of the recorded <u>Notice of Approval</u>. Any aggrieved party who wishes to appeal the final decision of the Zoning Official or the Board of Zoning Appeals must file an appeal with a court of competent jurisdiction within 30 days from the date on the decision letter.

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#### **Approval Criterial for Variances:**

Section 3-9-6.3(i) - Approval Criteria for Variances.

"<u>A variance shall be granted by the Board of Zoning Appeals only if all of the following Approval</u>
Criteria for Variances are found to exist:"

- (1) Unique or peculiar conditions or circumstances exist, which relate to the location, size and characteristics of the land or structure involved, and are not generally applicable to other lands or structures.
- (2) The strict and literal enforcement of the zoning section of the Land Development Regulations would create an undue hardship as distinguished from a mere inconvenience on the property owners. Physical handicaps or disability of the applicant and other considerations may be considered where relevant to the request.
- (3) The granting of a variance would not be injurious to or incompatible with contiguous uses, the surrounding neighborhood, or otherwise detrimental to the public welfare.
- (4) The condition giving rise to the requested variance has not been created by any person presently having an interest in the property and the conditions cannot reasonably be corrected or avoided by the applicant.
- (5) The requested variance is the minimum modification of the regulation at issue that will afford relief.

#### Section 3-9-6.3(I) - Administrative Variances:

"If the variance requested is for relaxation of the minimum development standards of no more than ten percent of the requirements or one foot, whichever is greater, the owner may request that the Zoning Official grant an administrative variance. If, upon proper investigation, the administrative variance is not found to be harmful to adjoining land uses or adverse to the public interest, the Zoning Official may proceed to grant the administrative variance after the (appropriate) procedure is completed and no written objection is received from an adjoining property owner within the time period specified. The Zoning Official shall review the application for sufficiency, which includes completeness of the application and consistency with the Comprehensive Plan, Code of Ordinances, and these Land Development Regulations."

The full text for section 3-9-6.3 of Charlotte County Code can be found at: https://www.municode.com

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(application continued)

File	e Number:		Invoice Nu	ımber:			
Da	te Submitted:			Date of BZA Meeting:			
		•	for office use on	• •			
		Incomplete applications will n	ot be processed	l until they are su	ufficient.		
1.	Name of Applicant:						
	(Address)	(City)			(State)	(Zip + four)	_
	(Phone Number)		/	(E-mail Address)			
2.	Name of Local Agen			,			
	· ·						_
	(Address)	(City)			(State)	(Zip + four)	
	(Phone Number)	/	/	(E-mail Address)			_
3.	Owner of Record:						
	(Address)	(City)	,		(State)	(Zip + four)	
	(Phone Number)	(Fax Number)	/	(E-mail Address)			
4.	4. Owners Authorization: If the applicant is not the owner of subject property the applicant must attach a nota				ttach a notarize	ed	
	Property Owner's C	onsent form giving the applica	nt permission to	o submit this app	lication.		
5.	Property Address:	(Address)	(City)		(State)	(Zip + four)	_
6.	Parcel Identification	n Number(s):			, ,	, , ,	
7.		Lot(s):					
,.		LOT(3)					
	· ·	if applicable:		·			
		; Township:				(East	t)
8.							•
	. Total Land Area: (in square feet or acres)  Current Zoning Classification:						
		Use Map (FLUM) Designation					

Submit this page as part of your application.



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<b>ummary of request:</b> Briefly state and summarize what your requested <u>Administrative Variance</u> is for. (e.g., front ard setback variance of two feet to allow a 23-foot setback instead of the required 25-foot setback.)					
<ol> <li>Narrative: On a separate sheet explain in detail the nature of the request and how your requested administrat variance meets the applicable <u>Approval Criteria</u> of County Code. (see page 2)</li> </ol>					
3. Plat of Survey and Concept Plan: Attach an up to date Plat of Survey and on separate sheets, please attach a Concept Plan of an appropriate scale, which illustrates clearly the placement of existing and proposed structures on the property, off-street parking, and required yards.					
4.Are there any existing structures located on the property?YESNO  If so, what is the current use of the structures, and illustrate their locations and dimensions on the concept plan.					
5.Are there any other hearings pending for this property?YES					
5.Was there a public hearing on this property within the past year?YESYESNO					
If YES, in whose name?					
Petition number: Nature of the request:					
7.Is this request the result of a violation notice?NO					
If <u>YES</u> , in whose name was the violation served?					
What was the nature of the violation?					
3. The applicant and owner hereby acknowledges and agrees that any staff discussion about conditions of approval are preliming only and are not final. Nor are they the specific conditions or demands required to gain approval of the application unless conditions or demands are actually included in writing in the final development order, or the final denial determination or order.					

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#### **Affidavit of Applicant (or Agent)**

I, the undersigned, being first duly sworn, depose and say that I am the owner, attorney, attorney-in-fact, agent, lessee or representative of the owners of the majority of the property described and which is the subject matter of the proposed application; that all answers to the questions in this application, and all sketches, data and other supplementary matters attached to and made a part of the application are honest and true to the best of my knowledge and belief. I understand this application must be complete and accurate before the application may be considered, and that if I am not the owner of the property, I have attached a notarized authorization from the owner(s) to submit with this application.

State of, Cou		,	County of			
The foregoing instrument w	The foregoing instrument was acknowledged before me, by means of $\Box$ physical presence or $\Box$ online notarization,					
this day of	20	, by	who is personally known to me or			
who has produced			as identification and who did/did not take an oath.			
Signature of Applicant or Agent			<del></del>			
Signature of Notary						
Printed Name of Notary						
Commission Number			<del></del>			

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Property Owner's Consent  I,		Ducas	w Owner's Canacast
do hereby give		<u> Propert</u>	ty Owner's Consent
do hereby give	l,	, property	owner of
State of	(print name of property	/ owner)	(address of subject property)
State of	do hereby give(print nat	ne of applicant)	permission to file this application to
State of	·	,	
day of			
Signature of Applicant or Agent  Signature of Notary  Printed Name of Notary			
Signature of Applicant or Agent Signature of Notary Printed Name of Notary	day of	20, by	who is personally known to me or who has
Signature of Notary  Printed Name of Notary	produced	as ider	ntification and who did/did not take an oath.
Signature of Notary  Printed Name of Notary			
Signature of Notary  Printed Name of Notary			
Signature of Notary  Printed Name of Notary			
Printed Name of Notary	Signature of Applicant or Age	ent	
Printed Name of Notary			
	Signature of Notary		<del>_</del>
Commission Number	Printed Name of Notary		<u> </u>
Commission Number			
	Commission Number		<del>_</del>

Submit this page as part of your application (if applicable).