

**TOWN OF WEAVERVILLE APPLICATION FOR
A VARIANCE**

Planning and Zoning Department, 30 South Main Street, P.O. Box 338, Weaverville, NC 28787
(828) 484-7002--- fax (828) 645-4776 --- jeller@weavervillenc.org
Application Fee: \$250.00

General Notes:

- Applications for a variance are required to be submitted at least three weeks in advance of the next scheduled meeting of the Zoning Board of Adjustment to afford sufficient time for the legal advertising of the evidentiary hearing.
- Fees associated with the application cover the cost of legal advertising of the evidentiary hearing and are nonrefundable once submitted.
- Subsequent permit fees may be applicable dependent upon the type and scope of construction.
- The Zoning Board of Adjustment follows a quasi-judicial process when making a determination on an application for a variance. Strict adherence to statutorily prescribed procedures before, during and after a hearing must be followed to ensure that constitutional due process rights of all parties are preserved.
- A document providing an overview of Zoning Board of Adjustment matters can be furnished by staff at the request of the applicant.
- Each item listed in subsections A-F listed below must be addressed in order for an application to become complete and eligible for review by the Zoning Board of Adjustment.

A. Property Information

Address of Subject Property: _____
PIN(s) of Subject Property: _____

B. Contact Information

Owner's Name: _____
Mailing Address: _____
Telephone #: _____ Email _____

Primary Contact if Other Than Owner and Authorization to Represent
Owner: _____
Mailing Address: _____
Telephone #: _____ Email _____

C. Type of Submission

Describe the Variance Requested: _____

Provision of Ordinance Relevant to Variance Application Including Section Title, Section Number, Subsection Number or Letter: _____

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D. Variance Burden of Proof

The Zoning Board of Adjustment is authorized to grant a variance when unnecessary hardships would result from carrying out the strict letter of the terms of Chapter 20 of the Code of Ordinances upon a showing of all of the following criteria. The burden of proof falls upon the applicant for each of the six standards listed below. Following each standard please indicate the facts you intend to demonstrate and the arguments you intend to make in support of the variance application. You may attach a separate page if necessary.

a. Unnecessary hardship would result from the strict application of this chapter. It shall not be necessary to demonstrate that, in the absence of the variance, no reasonable use can be made of the property.

b. The hardship results from conditions that are peculiar to the property, such as location, size, or topography. Hardships resulting from personal circumstances, as well as hardships resulting from conditions that are common to the neighborhood or the general public, may not be the basis for granting a variance.

c. The hardship did not result from actions taken by the applicant or the property owner. The act of purchasing property with knowledge that circumstances exist that may justify the granting of a variance shall not be regarded as a self-created hardship.

d. The requested variance is consistent with the spirit, purpose, and intent of this chapter such that public safety is secured and substantial justice is achieved.

e. The variance is not a request to permit a use of land, building or structure which is not permitted in the zoning district in which the property is located.

f. The variance is not a request to permit a prohibited sign.

Appropriate conditions may be imposed on any variance, provided that the conditions are reasonably related to the variance.

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E. List of Supporting Documents

Please provide an inventory of additional documentation submitted to the Board in support of the application. Such documentation should include a site plan with such information as the zoning administrator determines as needed for a full review of the application: _____

F. Certification

*I hereby certify that the information contained on this application is accurate to the best of my knowledge.

Signature of Owner: _____ Date: _____

Please indicate on the following line how you wish to receive a copy of the written order establishing a decision related to this application.

OFFICE USE ONLY

Date Received: _____
Date of Public Hearing: _____

Staff
Comments: _____

Fee: _____ Date: _____
Decision: _____ Date: _____
Approved with
Conditions: _____

Signature of Zoning Administrator: _____