| Variance Application   |  |                             |  |  |  |
|--|--|-----------------------------|--|--|--|
| Trimble County Board of Adjustments<br>123 Church Street<br>PO Box 251<br>Bedford, Kentucky 40006<br>Telephone: (502) 255-7196 Fax: (502) 255-4618   |  |                             |  |  |  |
| Please type or print (blue or black ink) Application Date:   |  |                             |  |  |  |
| Instructions<br>Applicant is property owner<br>requesting variance.  | Applicant Information (Box 1) Applicant:   |                             |  |  |  |
|  | Mailing Address:   |                             |  |  |  |
| Instructions   | Variance Description (Box 2)   |                             |  |  |  |
| Describe the requested<br>variance. Specify the use<br>and type of structure<br>(accessory or principle) if<br>applicable. Use additional<br>sheets, if necessary.<br>Check the type of variance<br>requested. | Provide a <i>detailed</i> description of the requested varia<br>necessary.<br>   | ☐ Side yard setback (right) |  |  |  |
| Specify the Zoning<br>Ordinance provision from<br>which variance is sought.  | Zoning Ordinance provision from which variance is requested:<br>Proposed dimension: Required dimension:<br>Is this variance application based on a refusal or decision by the Administrative Official<br>U Yes DNO<br>Has this property been subject of previous action by the Board of Adjustments or Trimt<br>County Planning Commission? UYes NO<br>Action Type : Docket #: Date:<br>Is this application in conjunction with Article XII or Article XIII? UYes NO |                             |  |  |  |
| Specify dimension required<br>by the Zoning Ordinances<br>and the proposed<br>dimension.<br>If yes, attach copy of the<br>refusal or decision.<br>If yes, specify action type                                  |  |                             |  |  |  |
| (zoning map amendment,<br>conditional use permit,<br>variance, or appeal),<br>application number and<br>date.  | If yes, complete box 4; if no, complete box 5<br>Is this application in conjunction with a Zoning Map Amendment?<br>Yes No<br>If Yes,<br>I agree to allow the Planning & Zoning Commission to rule on both the Variance and<br>Zoning Map Amendment.<br>I DO NOT agree to allow the Planning & Zoning Commission to rule on both the<br>Variance and Zoning Map Amendment.   |                             |  |  |  |

| Instructions   | Variance Justification (Box 3)  |  |
|--|---|--|
| Before any variance is granted<br>the Board of Adjustments must<br>find that the variance <u>will not</u><br>(KRS 100.243):  | Provide written justification for the variance (use additional pages, if necessary):  |  |
| (1) Adversely affect the public health, safety, or welfare;  | 1. Describe the reasons that the requested variance will not adversely affect the publi health, safety, or welfare, will not alter the essential character of the general vicinity, wi not cause a hazard, or nuisance to the public, and will not allow an unreasonable circum |  |
| <li>(2) Alter the essential<br/>character of the general<br/>vicinity;</li>  | vention of the requirements of the Zoning Ordinances.   |  |
| <li>(3) Cause a hazard or<br/>nuisance to the public;<br/>and,</li>  |   |  |
| (4) Allow an unreasonable<br>circumvention of the<br>requirements of the<br>Zoning Ordinances.   |   |  |
| In making these findings, the<br>Board of Adjustments and<br>Appeals shall consider wheth-<br>er :   | 2. Identify the circumstances that are special to property which do no generally apply to the Land in the general vicinity or in the same zoning classification.  |  |
| <ol> <li>The requested variance<br/>arises from special<br/>circumstances which do<br/>not generally apply to land<br/>in the general vicinity, or in<br/>the same zone;</li> </ol>  |   |  |
| (2) The strict application of the<br>regulations would deprive<br>the applicant of the<br>reasonable use of the land<br>or would create an<br>unnecessary hardship on<br>the applicant; and,   | 3. Describe how the strict application of the regulation would deprive you the reasonable use of the property or create an unnecessary hardship.  |  |
| (3) The circumstances are the<br>result of actions of the<br>applicant taken subsequent<br>to the adoption of the<br>zoning ordinance from<br>which relief is sought.  |   |  |
| The Board of Adjustment shall<br>deny any request for a variance<br>arising from circumstances that<br>are the result of willful violations<br>of the Zoning Ordinances by<br>the applicant subsequent to the<br>adoption of the Zoning<br>Ordinance from which relief is<br>sought. | 4. Specify actions that have been taken subsequent to the adoption of the Zoning Ordi-<br>nances that cause the circumstances for which the variance is sought .  |  |
|  |   |  |
|  |   |  |
|  |   |  |

| Required Sup  | pporting Documentation (Bo  | ox 4)   |
|---|---|---|
| The following supporting documentation  | n and fees must be submitte   | ed with the completed and signed ap-  |
| <ul> <li>1. Eight (8) copies no larger than 11" x 17<br/>drawn by a land surveyor or engineer r<br/>spaces, loading spaces, utility lines, ea</li> <li>2. A copy of the deed or Property/Map ca</li> <li>3. Complete listing of all names and maili<br/>and directly across the street. Adjacen</li> <li>4. Variance filing fee, non-refundable, pa</li> <li>*Attach additional photos/information as necessary</li> </ul>  | noting placement of the struc<br>asements, drainage, landscap<br>ard from the PVA.<br>ing address for all adjoining p<br>t property information shall be<br>yable to the Trimble County F   | ture, location of road(s), parking<br>ing and any other pertinent information .<br>roperty owners within, contiguous to,<br>e obtained from the PVA office.   |
| Required Sup  | pporting Documentation (Bo  | ox 5)   |
| The following supporting documentation and  | I fees must be submitted with t   | he completed and signed application:  |
| <ul> <li>1. Complete listing of all names and ma<br/>and directly across the street. Adjacen</li> <li>2. Draw a picture that includes the prop</li> <li>3. Variance filing fee, non-refundable, p</li> <li>*Attach additional photos/information as necessary</li> </ul>  | t property information shall be<br>perty lines, road frontage, build<br>payable to the Trimble County   | e obtained from the PVA office.<br>ding and setbacks  |
|   |   |   |
| Appli   | cant/Owner Certification  |   |
| I (We) do hereby certify that the information provided he<br>(we) understand that any inaccuracies may be consider<br>application. I (We) further certify that I am (we are) the<br>have the authority to file this application based on prope<br>as owner(s) of this property proposed for the conditional<br>application and aware of the variance hearing process u<br>(we) agree that the filing of this application constitutes a<br>ject property, their heirs, successors, and assigns, to con<br>Adjustments and the Zoning Ordinances. | red just cause for invalidation of t<br>owner(s) of the property for which<br>erly executed with the owner of th<br>I use, I am (we are) aware of the<br>under the Zoning Ordinances and<br>n agreement with all owners and<br>mply with the conditions imposed | his application and any action taken on this<br>in the variance application is filed or that I (we)<br>is property. I (We) further hereby certify that<br>development plan submitted as part of the<br>KRS 100. I (We) further hereby certify that I<br>other parties having an interest in the sub-<br>by the Trimble County Planning Board of |
| attorney-in-fact. If the signature is of an attorney, then so<br>owner of the affected property.  |   |   |
| Signatures of Applicant & Owners:   | Title:  | Date:   |
|   |   |   |

| State of Kentucky   |   |        |
|---|---|--------|
| County of Trimble   |   |        |
|   |   |        |
| Subscribed and sworn to before me   | y on thi  | S      |
| day of 20   |   |        |
|   | Notary Public, State of Kentucky at Large                                 |        |
|   | My Commission Expires   |        |
|   | Adjoining Landowner Waiver  |        |
| We, the undersigned, hereby waive r<br>going statements of the applicant. | otice, hearing and objection to the above proposed variance and concur in | the fo |
| Signature:  | Address:  |        |
|   | For Office Use Only   |        |
| Date Application Received :   | Received by:  |        |
| Filing Fee Paid: \$   | Check# Cash Dther (specify):  |        |
| Notice to Newspaper (Date):   | Adjacent Mailings (Date):   |        |
| Public Hearing (Date)   | BOA Meeting (Date):   |        |
| DOA Desision  |   |        |