

**APPLICATION OF A VARIANCE TO THE REQUIREMENTS OF THE
ZONING REGULATIONS
ARCADIA / ELYRIA / NORTH LOUP, NEBRASKA**

This portion to be filled out completely by Applicant

1. Name of Applicant; _____ 2. Address of Applicant: _____

3. Status of Applicant (check one): _____ Property Owner
_____ Option Holder
_____ Contract Purchaser
_____ Owner's Authorized Agent

4. Legal Description of real estate for which variance is requested: _____

5. Variance requested: _____

6. Explain why the strict application of the zoning regulations would produce an undue hardship: (a hardship must relate to peculiar situations of the property {land} and not the convenience of the owner / applicant): _____

7. Explain why such hardship is not shared generally by other properties in the same zoning district and in the same vicinity: _____

8. Explain why the granting of the requested variance will not be of substantial detriment to adjacent property: _____

9. I hereby certify that I have the legal authority to file this application, that I have completed and examined this application and know the same to be true and correct.

Signature of Applicant

This Section to be completed by the Zoning Administrator

1. Variance Case No. _____ 2. Application fee of \$ _____ paid
3. Application received on: _____, 20 _____

4. Existing zoning of property affected by Variance Application: _____

5. Reason building permit / certificate of zoning compliance denied (Cite applicable section {s} of zoning regulations): _____

6. Board of Adjustment Public Hearing Notice was published at least ten (10) days prior to such public hearing and required property owner notifications were completed (attach copy of legal notice) ___ Yes ___ No

7. Board of Adjustment public hearing was held and action was taken in accordance with the Board's Bylaws and Rules of Procedure. ___ Yes ___ No

8. Action by the Board of Adjustment:

Hardship(s) found by Board if any (limited to those listed in the zoning regulations): _____

___ Approval

___ Conditional Approval

Conditions of Approval: _____

___ Disapproval

Reason(s) for Disapproval: _____

9. Notice of Decision of Village Board of Adjustment mailed to Applicant on _____, 20 _____

Signature of Zoning Administrator