



# ZONING APPEAL TO THE BOARD OF ADJUSTMENT

APPEAL #: \_\_\_\_\_

\$ 75-RESIDENTIAL (HOMESTEAD ENCROACHMENTS ON HOMES BUILT PRIOR TO MAY 1987)

\$150-RESIDENTIAL (HOMESTEAD)

\$265-RESIDENTIAL/COMMERCIAL

**PLEASE TYPE OR PRINT USING BLACK INK**

APPEAL LOCATION:

Street Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Lot Number: \_\_\_\_\_ Block: \_\_\_\_\_ Addition: \_\_\_\_\_

**TO THE HONORABLE BOARD OF ADJUSTMENT:**

(Applicant)	(Applicant's Phone Number)
(Applicant's Street Address)	City
	State
	Zip)

In accordance with the provisions of Section 6-204, et seq. of the City of Plano Zoning Ordinance, appeal is now made to the Honorable Board of Adjustment to grant the following variance request. (Please be specific in request):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In order to make a finding of hardship and to grant a variance, the Board of Adjustment must determine that all of the following conditions are met. State how your request meets these conditions. Please note that the stated hardship shall not be financial nor self-induced.

- a. The requested variance does not violate the intent of the ordinance or its amendments:  
\_\_\_\_\_  
\_\_\_\_\_
- b. Special conditions of restricted area, shape, topography or physical features exist that are peculiar to the subject parcel of land and are not applicable to other parcels of land in the same zoning district:  
\_\_\_\_\_  
\_\_\_\_\_
- c. The hardship is in no way the result of the applicant's own actions:  
\_\_\_\_\_  
\_\_\_\_\_
- d. The interpretation of the provisions of this ordinance or its amendments would deprive the applicant of rights commonly enjoyed by other properties in the same zoning district that comply with the same provisions:  
\_\_\_\_\_  
\_\_\_\_\_
- e. How is the property going to be used?  
\_\_\_\_\_  
\_\_\_\_\_

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f. Is the denial of the variance going to cause a substantial burden on religious activities of the property owner/user?  
Circle one: Yes / No (If Yes, see question (g) below)

g. If yes, please explain how the denial of the variance will cause a burden on religious activities of the property owner/user?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

The undersigned officer(s) and/or agent(s) of the property owner(s) are the properly authorized officials and by signing below have the necessary authority to execute this application on behalf of applicant hereto.

Name	Address	City	State	Zip	Date
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**PLEASE CHECK ONE:**

\_\_\_\_\_ I will represent this variance request at the Board meeting

\_\_\_\_\_ I will not be able to represent this variance at the Board meeting. My authorized representative who will represent this variance before the Board of Adjustment is:

Name	Street Address	City	State	Zip
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**NOTE TO APPLICANT:**

A notice of meeting will be sent only to the applicant, or to the authorized representative, if one is designated. If the variance is denied, it may be two years before the variance can be reheard. The decision of the Board of Adjustment shall be final on all sign cases. Refer to The City of Plano Zoning Ordinance: Article 6, Section 6-209(3) to appeal the decision of the Board regarding a zoning case. \_\_\_\_\_ (initial)

I hereby certify that the above statements are true and correct to the best of my knowledge. I acknowledge that I may withdraw my application prior to it being presented to the Board. To resubmit the application I understand I will need to submit another application fee. \_\_\_\_\_ (initial)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Please Print Name

STATE OF TEXAS  
COUNTY OF COLLIN

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

(Seal) My commission expires: \_\_\_\_\_