

**APPLICATION FOR VARIANCE FROM ZONING ORDINANCE
REQUIREMENTS**

ADAMS COUNTY PLANNING AND ZONING DEPARTMENT
Judy Mignery, Zoning Director
500 N. Denver Ave., Hastings, NE 68901
Phone: 402-461-7174 Fax: 402-461-7177
Office Hours: Monday – Thursday, 8:00 – 12:00 and 1:00 – 4:00

DIRECTIONS:

- Fill out Form
- Filing Fee: \$175.00. Make checks payable to Adams County Planning and Zoning
- Contact Adams County Planning and Zoning if you have questions

Variances may be granted based because of a *Hardship* based on the *PROPERTY* due to:

- A. Exceptional narrowness of the property,
 - B. Exceptional shallowness of the property,
 - C. Unusual shape of the property,
 - D. Exceptional topographical conditions of the property,
- Other extraordinary AND exceptional situation or condition of the property.

GENERAL INFORMATION

APPLICANT NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

LEGAL DESCRIPTION: _____

PRESENT USE OF SUBJECT PROPERTY _____

PRESENT ZONING: _____

From what sections of the zoning and subdivision regulations are you seeking a variance? _____

Does the strict application of the Zoning Regulations of which you are seeking a variance from constitute an undue hardship? _____ Explain _____

Was the hardship self imposed? _____ Explain _____

Would the hardship exist in the absence of the regulations? _____ Explain _____

Does the Property have unique features or limitations? _____ Explain _____

Will granting this variance harm the public interest? _____ Explain _____

Is the hardship shared by other properties in the same vicinity? _____ Explain _____

Will granting this variance impair the purpose or intent of the zoning regulations? _____ Explain _____

APPLICANT'S SIGNATURE: I declare under penalty that all of the submitted information is true and correct to the best of my knowledge and belief.

Signature: _____ Date: _____

OFFICE USE ONLY

Date Submitted _____
Application No. _____
Filing Fee \$ _____
Date Advertised _____
BOA Action Approve _____ Deny _____
Zoning Administrator _____

Date Notice Sent _____
Date of Public Hearing _____
Treasures Receipt No. _____
Permit No. _____
Date _____