

Variance # _____

Zoning Permit # _____

Fee \$100 _____

(non refundable)



**TOWN OF IRMO
ZONING BOARD OF APPEALS
VARIANCE REQUEST**

Instructions:

- A. All questions on this application shall be fully answered;
- B. The application shall be signed by the owner or his agent;
- C. A plat plan drawn to scale, showing the actual dimensions and shape of the lot, the exact size and locations on the lot of all buildings and signs existing and proposed; and the locations of all required parking spaces shall be submitted;
- D. The Zoning Administrator shall certify that the proposed use and construction plans comply with all provisions of the Zoning Ordinance except those for which a variance has been requested.

1. Location: _____

2. I (we) have applied for a zoning permit to: _____

_____ and the Zoning Administrator has denied it on grounds that: _____

3. I (we) now appeal to the Board of Appeals for a variance permitting the action denied by the Zoning Administrator in that:

a. There are extraordinary and exceptional conditions pertaining to the particular piece of property. (Describe) _____

b. These conditions do not generally apply to other property in the vicinity. (Indicate why) _____

c. Because of these conditions, the application of the ordinance to the particular piece of property would effectively prohibit or unreasonably restrict the utilization of the property. (Indicate how the special conditions and circumstance arose) _____

d. The authorization of a variance will not be of substantial detriment to adjacent property or to the public good, and the character of the district will not be harmed by the granting of the variance. (Indicate why) _____

PROPOSED NEW CONSTRUCTION

- 1. Free standing structure () Addition to an existing building ()
- 2. Use _____ No of sq. ft. _____
- 3. Maximum height of building above finished grade _____ No of stories _____
- 4. Total parking spaces on lot _____

EXISTING USES AND BUILDINGS ON LOT

(To be answered only if buildings already exist on lot)

- 1. No. of existing buildings _____
- 2. Size and use of existing buildings:
 - a. Sq. Ft. _____ Use _____
 - b. Sq. Ft. _____ Use _____
 - c. Sq. Ft. _____ Use _____

Appellant (please print) Address Phone Number
 (if not owner, attach owner's written authorization)

Appellant Signature: _____ Date: _____

The use and construction as proposed herein complies with the terms of the Zoning Ordinance except for the variances requested.

Zoning Administrator

FR USE OF ZONING BOARD OF APPEALS ONLY

1. The request is granted without additional conditions.

2. The requested variance is granted with the following conditions and safeguards:

3. The requested variance is denied for the following reasons:

Record of vote: (1) _____ (2) _____

(3) _____ (4) _____ (5) _____

Irmo Zoning Administrator

Date: _____

P.O. Box 406 ♦ 7300 Woodrow Street ♦ Irmo, SC 29063
Phone: 803.781.7050 ♦ Fax: 803.749.2743
Email: vracine@townofirmosc.com