WILTON MANORS, Island City

2020 WILTON DRIVE, WILTON MANORS, FLORIDA 33305



COMMUNITY DEVELOPMENT SERVICES

(954) 390-2180 FAX: (954) 567-6069

VARIANCE APPLICATION

GENERAL PROCEDURES FOR FILING A VARIANCE SUBMITTAL APPLICATION:

- Variance submittal applications may be obtained at the Community Development Services Department and may be initiated by the owner of the property involved or his legally designated representative.
- An application for Variance approval together with the appropriate fee, as established by resolution of City Commission, shall be submitted with forms provided by the Community Development Services Department.
- The Community Development Services Department shall review the application and all support documents for completeness and notify the applicant of any deficiencies in the application or support documents and specify what additional requirements are to be met. Once the Community Development Services Department has determined that the application and support documents are complete, the Department shall place the Variance application on the next most appropriate Planning and Zoning Board agenda for a quasi-judicial public hearing. Planning and Zoning Board meetings are held regularly on the first Monday after the first Tuesday of each month, beginning at 7:00 p.m. A schedule of meeting dates and deadlines is available at the Community Development Services Department.
- The applicant will receive an agenda and staff report concerning the proposed Variance and staff recommendations prior to the Planning and Zoning Board meeting.
- The initial application submittal shall be accompanied by twelve (12) copies of <u>a site plan showing the proposed</u> improvement as it would be constructed if the variance is granted. Only one copy is required to be signed and sealed. All plans shall be folded and bound together in separate plan sets with a cover sheet indicating plan sheet numbers. The overall size of plans shall be twenty-four (24) by thirty six (36) inches drawn at a scale no smaller than one (1) inch equals twenty (20) feet except when a smaller scale is approved by the Community Development Services Department. All plans shall be prepared by professional land surveyors, engineers, architects, landscape architects, or other appropriate professionals as applicable. Such professionals shall be licensed and registered in the State of Florida. All plans shall be prepared by the proper professionals as determined by applicable laws.
- The following standards for review must be addressed by the applicant in a written document to accompany the application:
 - 1. There are special circumstances or conditions applying to the land or building for which the variance is sought, which circumstances or conditions are peculiar to such land or building and do not apply generally to land or buildings in the same district, and that said circumstances or conditions are such that the strict application of the provisions of this chapter would deprive the applicant of the reasonable use of such land or building for which the variance is sought, and that alleged hardship is not self-created by any person having an interest in the property;
 - 2. The granting of the variance is necessary for the reasonable use of the land or building and that the variance as requested is the minimum variance that will accomplish this purpose;
 - 3. The granting of the variance will be in harmony with the general purpose and intent of this chapter and will not be injurious to the neighborhood or otherwise detrimental to the public welfare.



WILTON MANORS, Island City 2020 WILTON DRIVE, WILTON MANORS, FLORIDA 33305

COMMUNITY DEVELOPMENT SERVICES

(954) 390-2180 FAX: (954) 567-6069

VARIANCE APPLICATION

Address/Location of Subject	Property:		
Owner (Applicant):			
Address:			
Telephone #:	Fax #:	E-mail:	
Agent for Applicant			
Address:			
Telephone #:	Fax #:	E-mail:	
Legal Description of Property I	nvolved:		_
Existing Zoning	Future Land Use Map designation		
Total Acreage/Square Footage	of Subject Property		
Associated Applications (i.e., Re	zoning, Plat, Comprehensive Plan	n amendment, etc.):	
		·	
Current Use of Land			
Description of Proposed Develo	opment		

I,	certify that I am the owner or authorize	ed representative of the property described
herein, and that all answers to the question made a part of this application, are hones	certify that I am the owner or authorize ons in this application and any sketches, data or out and true to the best of my knowledge and believe	other supplementary matter attached to and ef.
Signature of Property Owner	Print or type name	Date
Signature of Agent (if applicable)	Print or type name	Date
STATE OF FLORIDA)		
COUNTY OF BROWARD)		
	ged before me this day of who is personally known to me or who has a gradual day of as identification and who did not	produced
Notary Public		
Print or type name		
My Commission Expires:		

Authorized Agent Affidavit

NOTE: IF THE APPLICANT IS REPRESENTED BY AN AGENT, THE FOLLOWING POWER OF ATTORNEY <u>MUST</u> BE PROPERLY EXECUTED.

KNOW ALL MEN THAT I,	, do hereby constitute and appoint
my true and lawful agent, to e	execute the foregoing instrument in my name, place and
stead this,	
Signature of owner or authorized agent	Date
Print or type name	
Name of owner/agent entity if a corporation, L.L.C., partnership, trust, etc.	
Representative capacity of person signing Affidavit:	
President or Vice President of Corporation	
Managing Member of L.L.C.	
General Partner	
Trustee	
Etc.	
STATE OF FLORIDA)	
)	
COUNTY OF BROWARD)	
The foregoing instrument was acknowledged before me this day of who is personally known to me or who	
as identification and who did	
Notary Public	
Print or type name	
My Commission Expires:	

City of Wilton Manors Variance Application Package Page **4** of **5**

Permission to Reproduce Drawings and Documents

IF DRAWINGS PREPARED BY AN ARCHITECTURAL, ENGINEERING OR OTHER FIRM ARE SUBMITTED, THE FIRM <u>MUST</u> EXECUTE THE PERMISSION TO REPRODUCE ON THE FOLLOWING PAGE.

AFFIDAVIT

KNOW ALL MEN THAT I,	,(Title), of the firm of	
, do hereb	by grant the City of Wilton Manors permission to reproduce a	ll or
portion of all plans, drawings, etc., submitted in connecti	on with the foregoing application.	
Signature		
Print or type name		
Title:		
Date:	<u> </u>	
STATE OF FLORIDA)		
COUNTY OF BROWARD)		
The foregoing instrument was acknowledged before me	this,, by	
who is p	ersonally known to me or who has produced	
	as identification and who did not take an oa	ath.