



CITY OF CLINTONVILLE Variance Request Information Acknowledgement

Appeals to the Zoning Board of Appeals are considered on a case by case basis at a Public Hearing. In order to be considered at a meeting, your application and fee shall be received by the City Clerk-Treasurer or designee in sufficient time to allow for staff to follow all legal requirements associated with zoning variances, which includes, but is not limited to, notification of neighboring properties and publishing a Class 1 Notice in the official newspaper. The Zoning Board of Appeals will schedule a meeting no less than seven (7) days after publication.

ALL applications must include:

1. Application form signed and dated.
2. A \$125.00 filing fee, payable by cash or check.
3. A site sketch drawn to scale, if possible, including the location of all existing structures and the proposed construction. If a proposed addition, stakes should be placed to indicate area of proposed addition for Board members to view prior to meeting.

Applicants should be prepared to answer the following questions:

1. What hardship is created by the application of the Zoning Ordinance to this property? Is reasonable use of the property denied by zoning regulations? In other words, is there any alternative plan that would comply with the ordinance?
2. Is there a unique physical characteristic of the property that prevents development in compliance with the Zoning Ordinance?
3. Would granting of the variance harm the public interest in any way? For example: Would public safety be compromised? What aesthetic impact would the project have? Would the proposal interfere with protected shorelands? What other impacts would the project have on the public interest?

A notice of the date and time of the hearing and a site plan will be mailed to all opposite and abutting property owners of your property.

The property owner or his/her representative shall be present at the Public Hearing to present the request to the Board and answer any questions it may have. Should an appearance not be made or should insufficient information be presented, the appeal will not be considered and will be placed on the agenda for the next meeting. The appellant will be required to pay the additional expense incurred because of the postponement of the hearing.

I have read and understand my responsibilities regarding my appeal to the Zoning Board of Appeals.

Signature

Date

Print Name

Complete Address

Telephone Number



VARIANCE REQUEST APPLICATION
CITY OF CLINTONVILLE
50 Tenth Street, Clintonville, WI 54929
715-823-7600

Application Fee \$125.00

Class 1 Notice – Hearing

Date Published: _____

TO: City of Clintonville
Board of Zoning & Housing Appeals
50 10th Street
Clintonville, WI 54929

Applicant _____

Phone _____

Address _____

The undersigned hereby appeals for a variance from the provisions of Chapter _____ Section _____ of the Municipal Code of Ordinances of the City of Clintonville*, and in connection with such appeal presents the following information to the Board:

Address of property for conditional use if different: _____

Present Zoning _____

Opposite Property Owners (with address):

Abutting Property Owners (with address):

Variance Requested:



Additional Information: _____

Appellant has attached is a scaled drawing indicating the land area and proposed construction or item for which a variance is requested (1" = 10' scale).

Appellant Signature Date

CC: Appellant
Board of Zoning Appeals Members (5)
Alternates
Opposite and Abutting Property Owners

Reasons for denial by the Building Inspector:

*Chapters of City Ordinance that require variances are: Chapter 14 – Building Code Chapter 19 – Subdivision of Lands
Chapter 17 – Zoning Ordinance Chapter 21 – Airport Zoning
Chapter 18 – Flood Plain Ordinance Chapter 22 – Housing Ordinance

For City Staff Use Only	
Date Received _____	
Fee Paid _____ Receipt # _____ (100-4440-11)	
Meeting Date _____	
Staff Signature _____	