



TOWN OF HILLIARD
VARIANCE APPLICATION
15859 W CR 108 Hilliard, FL 32046
Phone: 904-845-3555 | cs@townofhilliard.com

For Staff Only

File #: _____

Application Fee: \$ _____

Payment Processed By: _____

Variance Application

A. PROJECT

1. Project Name: _____
2. Address of Subject Property: _____
3. Parcel Number(s): _____
4. Existing Use of Property: _____
5. Future Land Use Map Designation: _____
6. Zoning Designation: _____
7. Acreage: _____

B. APPLICANT

1. Applicant's Status: ☐ Owner (title holder) ☐ Agent
2. Name of Applicant(s) or Contact Person(s): _____ Title: _____
Company (if applicable): _____
Mailing address: _____
City: _____ State: _____ ZIP: _____
Telephone: () _____ E-mail: _____
3. If the applicant is agent for the property owner*
Name of Owner (titleholder): _____
Company (if applicable): _____
Mailing address: _____
City: _____ State: _____ ZIP: _____
Telephone: () _____ E-mail: _____

*** Must provide executed Property Owner Affidavit authorizing the agent to act on behalf of the property owner.**



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C. STATEMENT OF VARIANCE SOUGHT

1. Requested Variance: _____
2. Section of Town Code under which the variance is sought: _____
3. Reason Variance is requested: _____
4. Statement of Facts for Requested Variance (Use additional pages if necessary)

(PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR ABILITY. THESE FACTS WILL BE USED BY THE STAFF TO MAKE A RECOMMENDATION AND THE PLANNING AND ZONING BOARD IN MAKING THEIR DECISION)

Extraordinary and Exceptional Conditions- What are the extraordinary and exceptional conditions (such as topographic conditions, narrowness, shallowness, or the shape of a parcel of land) pertaining to the particular piece of land for which the variance is sought, that do not generally apply to other land or structures in the same district? _____

Not Result of Action by Applicant- Why are the special circumstances not the result of the actions of the applicant? _____

No Special Privilege- Does the granting of the variance confer any special privilege on the applicant that is denied to other lands or structures in the same zone district? _____

Strict Application Deprives Use- Would the strict interpretation of the Town Code to this property effectively prohibit or unreasonably restrict the utilization of the land and result in unnecessary and undue hardship? _____

Minimum Variance- Is the variance the minimum action that will make possible the reasonable use of the land or structure which is not contrary to the public interest, and which would carry out the spirit of the Town Code? _____

Not Detrimental- Is the granting of the variance a detriment to the adjacent land, and the character of the zoning district in which the land is located? _____



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D. ATTACHMENTS (One hard copy or one copy in PDF format)

1. Copy of Warranty Deed or other proof of ownership
2. Legal description
3. Survey of the property
4. Site plan of the property indicating setbacks, proposed construction and requested variance.

E. FEES:

Residential property - \$750.00

Non-residential - \$1,000.00

1. The Cost of postage, signs, advertisements, and outside consultants are in addition to the application fee.
2. The applicant is responsible to pay the cost listed above.

The Applicant is responsible for paying a \$1,000.00 deposit at the time of submittal.

No application shall be accepted for processing until the required application fee is paid in full.

All attachments are required for a complete application. A completeness review of the application will be conducted within ten (10) business days of receipt. If the application is determined to be incomplete, the applicant will be required to provide the needed documents prior to approval of work. Work prior to approval will result in a Code Enforcement Violation.

I/We certify and acknowledge that the information contained herein is true and correct to the best of my/our knowledge:

Signature of Applicant

Signature of Co-applicant

Typed or printed name and title of applicant

Typed or printed name of co-applicant

Date

Date

State of _____

County of _____

The foregoing application is acknowledged before me this _____ day of _____, 20_____, by _____, who is/are personally known to me, or who has/have produced _____ as identification.

NOTARY SEAL

Signature of Notary Public, State of _____