

(Execute in Duplicate)

# Petition For Area/Bulk Variance

Zoning Board of Appeals  
St. Clair County Courthouse  
Belleville, IL 62220-1623

Variance Request No. \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_\_\_

(Do not write in this space - For office use only)

Date set for hearing \_\_\_\_\_

Perm. Parcel No. \_\_\_\_\_

Date hearing held \_\_\_\_\_

Fee paid to County Treasurer:

Notice published on \_\_\_\_\_

\$\_\_\_\_\_ Date \_\_\_\_\_

Newspaper \_\_\_\_\_

Action by Board of Appeals:

Comments: (Indicate other actions  
such as continuances):

Denied

\_\_\_\_\_

Approved

\_\_\_\_\_

Approved with modification by Board

\_\_\_\_\_

**Instructions to Applicants:** All information required by this application must be completed and submitted herewith. Applicants are encouraged to visit the office of Director of Zoning for any assistance needed in filling out this form.

Notice to Applicants: Attach to this form an "Application for Certificate of Zoning Compliance." All applications shall comply with the applicable provisions of Article VII, Section 7.06 (c) (1).

1. Name of Owner or Owners: \_\_\_\_\_  
(Attach additional sheets, if necessary.)

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Applicant's name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Property interest of applicant: \_\_\_\_\_  
(Owner, contract purchaser, etc.)

4. With respect to any portion of these premises a previous appeal or petition for variance was made:

No  Yes If "yes", list all previous appeals, and/or petitions, giving dates:

\_\_\_\_\_  
\_\_\_\_\_

5. Address of property: \_\_\_\_\_

6. Present use of property: \_\_\_\_\_

7. Present zoning of property: \_\_\_\_\_

8. Does the present use of the property conform to all use regulations for the zone district in which it is located?  Yes  No If "no", specify each non-conforming use.

9. Do the existing structures comply with all area and bulk regulations for the zone district in which it is located?  Yes  No If "no", specify each non-conforming condition.

10. Which unique physical characteristics prevent reasonable use for any of the uses permitted in that zoning district?

Too narrow

Topography

Soil

Too small

Drainage

Sub-surface

Too shallow

Shape

Other:

11. What is the "minimum" modification (variance) from the area – bulk regulations that will permit you to make reasonable use of your land? (Specify, using maps, site plans with dimensions, and written explanation. Attach additional sheets, if necessary.)
  
12. Are the conditions of hardship for which you request a variance peculiar only to the property described by this petition?
 

No    Yes   If "no", how many other properties are similarly affected?
  
13. An area/bulk variance is requested for the property described above in conformity with the documents submitted herewith.
  
14. Utilities:
 

<input type="checkbox"/> Public Water	<input type="checkbox"/> Public Sewer
<input type="checkbox"/> Well or Cistern	<input type="checkbox"/> Septic or Aeration
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

I certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and accurate.

I consent to the entry in or upon the premises described in this application by any authorized official of St. Clair County for the purpose of inspecting or of posting, maintaining, and removing such notices as may be required by law.

Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_