

Town of Smithfield Planning Department

350 E. Market St. Smithfield, NC 27577 P.O. Box 761, Smithfield, NC 27577

Phone: 919-934-2116 Fax: 919-934-1134

VARIANCE APPLICATION

Pursuant to Article 4, of the Town of Smithfield Unified Development Ordinance, an owner of land within the jurisdiction of the Town (or a duly authorized agent) may petition the Board of Adjustment for relief from a requirement of the Unified Development Ordinance and to permit construction in a manner prohibited by this Ordinance where specific enforcement would result in unnecessary hardship.

In granting variances, the Board of Adjustment may impose such reasonable conditions as will ensure that the use of the property to which the variance applies will be as compatible as practicable with the surrounding properties.

Variance applications must be accompanied by a complete PDF application, 1 PDF of required plans, an Owner's Consent Form (attached) and the application fee.

SITE INFORMATION:				
Name of Project:	Acreage of property:			
Parcel ID Number:	Tax ID:			
Deed Book:	Deed Page(s):			
Address:				
Location:				
Existing Use:	Proposed Use:			
Existing Zoning District:				
Requested Zoning District				
Is project within a Planned Development:	Yes No			
Planned Development District (if applicable):				
Variance Request (List Unified Development Code sections and paragraph numbers)				
FOR OFFICE USE ONLY				
File Number: Date Received:	Amount Paid:			

OWNER INFORMATION:				
Name:				
Mailing Address:				
Phone Number:	Fax:			
Email Address:				
A DDI LCANTE INFORMATION				
APPLICANT INFORMATION:				
Applicant:				
3.6 (1)				
Phone Number:				
Contact Person:				
Email Address:				
DECLIDED BY ANC AND CURBLEN	MENITAL INFORMATION			
REQUIRED PLANS AND SUPPLEM	ALNIAL INFORMATION			
The following items must accompany a vari all plans, except where otherwise noted:	iance application. This information is required to be present on			
All required plans (please see the plan requirements checklist).				
Owner Consent form				
A Statement of Justification.				
Required Finding of Fact.				
Other Applicable Documentation:				
STATEMENT OF JUSTIFICATION				
STATEMENT OF JUSTIFICATION				
Please provide detailed information concern	ning all requests. Attach additional sheets if necessary.			

REQUIRED FINDINGS OF FACT

Article 4, Section 4.10.2.2 of the Town of Smithfield Unified Development Ordinance requires application for a variance to address the following findings. The burden of proof is on the applicant and failure to adequately address the findings may result in denial of the application. Please attach additional pages in necessary.
4.10.2.2.1 Unnecessary hardship would result from the strict application of the Ordinance. It shall not be necessary to demonstrate that, in the absence of the variance, no reasonable use can be made of the property.
4.10.2.2.2. The hardship results from conditions that are peculiar to the property, such as location, size, o topography. Hardships resulting from personal circumstances, as well as hardships resulting from condition that are common to the neighborhood or the general public, may not be the basis for granting a variance.
4.10.2.2.3. The hardship did not result from actions taken by the applicant or the property owner. The act o purchasing property with knowledge that circumstances exist that may justify the granting of a variance shall not be regarded as a self-created hardship.
4.10.2.2.4. The requested variance is consistent with the spirit, purpose, and intent of the Ordinance, such that public safety is secured and substantial justice is achieved.

APPLICANT AFFIDAVIT

I/We, the undersigned, do he	reby make application and petition to the Boa	erd of Adjustment of the Town of
Smithfield to approve the su	bject Variance request. I hereby certify that I	I have full legal right to request
and correct to the best of my	ements or information made in any paper or p knowledge. I understand this application, rela e Planning Department of the Town of Smithfi	ited material and all attachments
be returned.		,
Print Name	Signature of Applicant	Date



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OWNER'S CONSENT FORM

Name of Project:	S	ubmittal Date:
OWNERS AUTHORIZATION		
required material and documents, pertaining to the application(s) i	and to attend and represendicated above. Furtherm	(type, stamp or print or have submitted this application and all ent me at all meetings and public hearings nore, I hereby give consent to the party h may arise as part of the approval of this
application. I understand that any agent will result in the denial, reapproval or permits. I acknowle application. I further consent to the	false, inaccurate or incorevocation or administrativedge that additional informe Town of Smithfield to paths application for any the	an ownership interest in the subject of this implete information provided by me or my be withdrawal of this application, request, mation may be required to process this publish, copy or reproduce any copyrighted aird party. I further agree to all terms and this application.
Signature of Owner	Print Name	Date
CERTIFICATION OF APPLIC	CANT AND/OR PROPE	RTY OWNER
and correct to the best of my k	knowledge. I understand	paper or plans submitted herewith are true this application, related material and all rtment of the Town of Smithfield, North
Signature of Owner/Applicant	Print Name	Date
FOR OFFICE USE ONLY		
File Number: Date R	eceived:	Parcel ID Number