



SARPY COUNTY PLANNING & BUILDING DEPT.

1210 GOLDEN GATE DRIVE, #1240

PAPILLION, NE 68046

PHONE: 402-593-1555 FAX: 402-593-1558 E-MAIL: PLANNING@SARPY.COM

BOARD OF ADJUSTMENT APPLICATION

In order for your application to be considered **COMPLETE**, please answer all applicable questions and provide the following:

1. Completed Board of Adjustment Application
2. Non-Refundable Fee of **\$300** made payable to Sarpy County (an additional fee of **\$25.00** is also be required to cover cost of mailing of public notifications)
3. Mailing list labels certified by a Title Company of all property owners within 300 ft. of the subject property.
4. Copy of Deed on file with Register of Deeds or other acceptable proof of ownership
5. Two (2) site plan drawings (folded)
6. One (1) reduced size site plan drawing (8.5 x 11)
7. One (1) electronic copy of site plan drawing in PDF form
8. Site plan drawing should include the following (as applicable)
 - a. Legal description with site layout (1"=20') including lot size
 - b. Floodplain/floodway boundaries
 - c. Existing easements
 - d. General location map (2 mile radius)
 - e. Elevations or other supporting materials
9. Detailed operational plans (if applicable)
10. **Please review Section 42 of the Sarpy County Zoning Regulations for details of the Board of Adjustment process and submittal requirements.**

PLANNING STAFF USE ONLY:

APPLICATION #: _____

DATE RECEIVED: _____

CP DESIGNATION: _____

CURRENT ZONING DESIGNATION: _____

PROPOSED ZONING DESIGNATION: _____

APPLICATION FEE: \$ _____ RECEIPT NO. _____

PUBLIC NOTIFICATION

PROCESSING FEE: **\$25.00** RECEIPT NO. _____

RECEIVED BY: _____

NOTES: _____

APPROVED DENIED DATE: _____

AUTHORIZED SIGNATURE: _____

APPLICANT INFORMATION:

NAME: _____ E-MAIL: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____
(IF DIFFERENT)

PHONE: _____ FAX: _____

PROPERTY OWNER INFORMATION: (if multiple owners, please attach separate sheet)

NAME: _____ E-MAIL: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____
(IF DIFFERENT)

PHONE: _____ FAX: _____

ENGINEERING/SURVEYING OR OTHER CONSULTING PROFESSIONAL'S INFORMATION:

NAME: _____ E-MAIL: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____
(IF DIFFERENT)

PHONE: _____ FAX: _____

PROJECT SITE INFORMATION:

SUBDIVISION NAME: _____

GENERAL LOCATION: _____
(example 189th & Giles Rd)

ASSESSOR'S PARCEL NUMBER: _____ **ADDITIONAL PARCEL NUMBERS** _____

LEGAL DESCRIPTION: *(Describe property to wit:)* _____

SIZE OF PROPERTY: _____ *acres* **CURRENT ZONING:** _____ **PROPOSED ZONING (if applicable):** _____

REQUEST INFORMATION

This is a request for (check one):

- An appeal of a determination of the Planning & Building Director
- Interpretation of a zoning map
- Variance of the zoning or subdivision regulations to relieve a hardship

Please describe the reason for the request (attach additional pages if necessary):

PLEASE NOTE THE FOLLOWING PROCEDURES:

1. The Planning Department and other appropriate departments and/or agencies will review the application material and provide a staff report to the Board of Adjustment outlining the reasoning for their determination.
2. The Board of Adjustment will hold a public hearing and make a determination on the application.
3. Appeals: Any person or persons, jointly or severally, aggrieved by any decision of the Board of Adjustment, or any officer, department, board, or bureau of the County, may present to the district court for the County a petition, duly verified, setting forth that such decision is illegal, in whole or in part, and specifying the grounds of the illegality. The petition must be presented to the court within fifteen days after the filing of the decision in the office of the County Clerk.

The applicant (or authorized agent) has prepared this application and certifies that the facts stated herein and exhibits attached hereto are true and correct.

Applicant/Property Owner Signature

Date

I, the undersigned, fully understand that a sign will be posted on my property and must remain on my property (in the location posted by County staff) until County staff retrieves the sign. I further understand the Board of Adjustment process as stated in Section 42 of the Sarpy County Zoning Regulations and I authorize Sarpy County staff to enter the property for inspection related to the specific request during this process.

Property Owner Signature

Date

Property Owner Signature

Date

VARIANCE APPLICATION ONLY (please attach separate sheet to fully answer if needed :

Please describe the proposed use related to the variance:

Please list the sections of the Sarpy County Zoning or Subdivision Regulations from which you seek a variance:

Please explain how strict application of the zoning or subdivision regulations will produce undue hardship:

Please explain how the hardship is not shared generally by other properties in the same zoning district and in the same vicinity:

Please explain how the authorization of this variance will not be of substantial detriment to adjacent property, and the character of the district will not be changed by the granting of the variance:

Please explain how the granting of this variance is based upon demonstrable and exceptional hardship as distinguished from variations of the regulations for purposes of convenience, profit or caprice:

Please explain how the condition or situation of the property concerned or the intended use of the property is not of so general or recurring a nature as to make reasonable practicable a general regulation to be adopted as an amendment to the zoning or subdivision regulations:

Please explain how the granting of the variance will not cause substantial detriment to the public good and will not substantially impair the intent and purpose of any zoning or subdivision regulation:
