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| For Office Use Only | |
| Fee Paid \$ | _____ |
| Cash | Check # _____ |
| Application # | _____ |
| Date Received | _____ |

CITY OF MARION
 194 N. Main Street • P.O. Drawer 700 • Marion, NC 28752
Planning & Development Department

VARIANCE APPLICATION
 (PLEASE TYPE OR PRINT IN INK)
 Application Fee: \$300.00

All applications must be deemed complete prior to the item being scheduled.

Property Owner's Name: _____ Phone Number: _____

Property Owner's Mailing Address: _____

Applicant's Name (if different from above): _____

Applicant's Mailing Address: _____ Phone Number: _____

Note: Applicant must submit a notarized letter authorizing them to act on the property owner's behalf and stating the Applicant's name, address and phone number.

Physical Address of Property: _____

Parcel ID Number (PIN) _____ Zoning District: _____ Lot Size: _____

Existing Use: _____ Proposed Use: _____

This is a permitted use/ special exception under Section _____ of the Marion City Code.

This involves a request to vary from Article/ Section _____ of the Marion City Code for the following reasons:

Describe the Variance request and exactly what the variance would allow you to do:

Describe any additional information or evidence that the Applicant feels will further the case:

Pursuant to Section 21-303.3 *Variances* of the Marion City Code, to authorize upon appeal in specific cases such variance from the terms of this Ordinance as will not be contrary to the public interest where, owing to special conditions, a literal enforcement of the provisions of this Ordinance will in an individual case, result in practical difficulty or unnecessary hardship, so that the spirit of the Ordinance shall be observed, public safety and welfare secured, and substantial justice done. Such variance may be granted in such individual case of unnecessary hardship upon a finding by the Board that the following conditions exist:

- (1) There are extraordinary and exceptional conditions pertaining the particular place or property in question because of its size, shape, or topography that are not applicable to other lands or structures in the same district.
- (2) Granting the variance requested will not confer upon the applicant any special privileges that are denied to other residents of the district in which the property is located.
- (3) A literal interpretation of the provisions of this Ordinance would deprive the applicant of rights commonly enjoyed by other residents of the districts in which the property is located.
- (4) The requested variance will be in harmony with the purpose and intent of this Ordinance and will not be injurious to the neighborhood or to the general welfare.
- (5) The special circumstances are not the result of the actions of the applicant.
- (6) The variance requested is the minimum variance that will make possible the legal use land building and structure.
- (7) The variance is not a request to permit a use of land, building, or structure which is not permitted by right or by special exception the district involved.

The following supporting information must accompany the application for variance:

___Site Plan, drawn to a scale of at least one (1) inch to forty (40) feet, showing property lines, setbacks and proposed and existing structures on the property in question as well as neighboring properties.

___Photographs of the site, looking N, E, S & W from perimeters of the subject property and from the main adjacent road. A recent aerial photograph with delineated property boundaries may be substituted.

___Property Assessor Card of the subject property. (Information can be obtained from the McDowell County Property Assessor’s Office 10 East Court Street, Marion NC 28752, (828) 652-7121.

I UNDERSTAND THAT THE BURDEN IS UPON ME, THE APPLICANT, TO PRODUCE COMPETENT, MATERIAL AND SUBSTANTIAL EVIDENCE WHICH TENDS TO ESTABLISH THE EXISTENCE OF FACTS, STANDARDS AND CONDITIONS WHICH THE ORDINANCE REQUIRES UNDER SECTION 1204.3 VARIANCES OF THE MARION CITY CODE.

I CERTIFY THAT ALL OF THE INFORMATION PRESENTED IN AND WITH THIS APPLICATION IS TO THE BEST OF MY KNOWLEDGE, IS TRUE, COMPLETE AND ACCURATE.

SIGNATURE OF APPLICANT DATE

**STATE OF NORTH CAROLINA
COUNTY OF McDOWELL**

I, _____ a Notary Public, certify that _____ personally came before me this day and acknowledged the due execution of the foregoing instrument. IN WITNESS WHEREOF, I have hereunto set my hand and notarial seal, this the _____ day of _____, 20____.

SEAL:

Notary Public Signature

My Commission Expires _____