



Planning and Zoning Application

APPLICANT NAME			
APPLICANT EMAIL	APPLICANT PHONE		
PROJECT LOCATION/ADDRESS			
APPLICANT AGENT NAME (CONTRACTOR/CONSULTANT/ETC.)			
PROPERTY OWNER NAME, ADDRESS, EMAIL, PHONE , and OWNER'S SIGNATURE (REQUIRED)			
REQUEST FOR <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> Appeal Annexation Certified Survey Map (CSM) Preliminary Plat Final Plat Replat Rezoning (Zoning Map Amendment) Plan Amendments </td> <td style="width: 50%; vertical-align: top;"> Development Review PUD General Development Plan PUD Specific Implementation Plan Parking Lot / Driveway Right-of-Way Vacation Special Use Permit Variance </td> </tr> </table>		Appeal Annexation Certified Survey Map (CSM) Preliminary Plat Final Plat Replat Rezoning (Zoning Map Amendment) Plan Amendments	Development Review PUD General Development Plan PUD Specific Implementation Plan Parking Lot / Driveway Right-of-Way Vacation Special Use Permit Variance
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ATTACH LEGAL DESCRIPTION OF PROPERTY <p style="margin-left: 20px;">Required for all annexations, appeals, CSMs, rezoning, right-of-way vacation.</p>			
NARRATIVE DESCRIPTION OF REQUEST (ATTACH AS SEPARATE SHEET)			
APPLICANT SIGNATURE <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> PRINT <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> SIGN DATE	FOR INTERNAL USE ONLY CHECK# <hr style="border: 0; border-top: 1px solid black; margin: 5px 0; width: 80%; display: inline-block;"/> RECEIPT# <hr style="border: 0; border-top: 1px solid black; margin: 5px 0; width: 80%; display: inline-block;"/>		

Planning and Zoning Application Part 2: Variance Requests Only (page 1)



In addition to the Planning and Zoning Application Form, the following materials are required for a variance request. Community Development Staff can assist you with questions or guidance when completing a variance request application.

TYPE OF VARIANCE:	
Use Variance:	Area Variance:
ZONING DISTRICT:	
OVERLAY ZONING DISTRICTS, IF APPLICABLE:	
TYPE OF PROJECT:	Single Family Residential – City (\$670.00) Multiple Family or Nonresidential – City (\$1,275.00) Extraterritorial Zoning District (ETZ) property (\$1,650.00)

INCLUDE THE FOLLOWING REQUIRED MATERIALS AS ATTACHMENTS:

1. Site plan prepared by a licensed professional, drawn to scale, depicting the following:

- Entire site, surrounding properties, and property boundaries
- All existing and proposed structures and pavement with dimensions
- Navigable waterways, wetlands, floodplains, and slopes over 20%
- Any other unique limiting features of the property

2. Narrative

In your narrative, demonstrate how property meets the 3 variance tests that result in a zoning hardship by writing your responses to the three tests below:

Test 1- Zoning results in an unnecessary hardship

Please describe the hardship caused by existing zoning requirements. Unnecessary hardship is independent of the applicant’s personal, financial, or economic circumstances. A zoning hardship cannot be self-imposed or created by a prior property owner. A variance cannot be used to correct an existing violation, nor can it be approved based on a desire to increase a property’s value. Applicants also cannot allege that an approved variance will increase the property’s tax revenue to the City’s benefit or use a variance to reduce construction costs (e.g., a site plan that requires a variance to avoid extra grading or more expensive retaining walls).

Planning and Zoning Application Part 2: Variance Requests Only (page 2)



Test 2 - Unique property limitations are present

Please describe the property’s features which are not found on similar properties that make zoning requirements difficult to comply with. Please be specific when describing the zoning requirement and how much relief you are requesting from it. A personal situation or preference, prior approved variances, existing ordinance violations, and lack of opposition from neighbors are factors that do not support why a variance request should be approved.

Test 3 – Variance is not contrary to public interest

Please describe any impacts an approved variance would have for both surrounding properties and to the entire City. For neighboring property impacts, consider items such as noise, traffic, glare, or environmental impacts. For community impacts, consider if the overall quality of life would be reduced if every property was hypothetically allowed to receive the same variance.

CERTIFICATION

I certify by my signature that the information provided in this application is true and correct to the best of my knowledge. I give permission to City of River Falls staff and Board of Appeals members to enter the subject property to inspect and gather information related to the variance request. I understand there is no guarantee that the variance will be approved and that the application fee is non-refundable. This fee is in addition to any development review, building permit, or other fees required to construct the proposed structure. I agree to withdraw or amend this application if substantive false or incorrect information has been included. I understand that a meeting and public hearing will not be held until all application materials are submitted to the City of River Falls. I understand that all materials associated with this variance request are public record, and that I may have an agent or attorney present at the meeting to represent me.

APPLICANT/AGENT SIGNATURE	
PRINT	
SIGN	DATE
PROPERTY OWNER SIGNATURE	
PRINT	
SIGN	DATE