



**ZONING VARIANCE APPLICATION
BOARD OF ADJUSTMENT
TOWN OF NAGS HEAD, NORTH CAROLINA**

Application No. _____ Date _____
Application Fee \$500.00 _____ Receipt No. _____

VARIANCES APPROVED BY THE BOARD OF ADJUSTMENT RUN WITH THE PROPERTY. THEREFORE, APPLICANTS MUST BE THE PROPERTY OWNER, OR A DESIGNATED REPRESENTATIVE OF THE PROPERTY OWNER. REFERENCE TO YOU, YOUR OR THE APPLICANT IN THIS APPLICATION INCLUDE THE PROPERTY OWNER IF THE APPLICANT IS NOT THE PROPERTY OWNER. NOTARIZED SIGNATURES OF ALL APPLICANTS ARE REQUIRED ON THE LAST PAGE. ADDITIONAL PAGES MAY BE ATTACHED TO ANSWER ANY QUESTIONS IN THIS APPLICATION OR TO PROVIDE ANY SUPPLEMENTAL INFORMATION.

1. Applicant Name _____
Mailing Address _____
City _____ State _____ Zip Code _____
Telephone _____
2. Property Owner Name (If different from Applicant) _____
Mailing Address _____
City _____ State _____ Zip Code _____
Telephone _____
3. Property for which variance is requested:
Street Address _____
Tax Parcel Identification Number _____
Subdivision Name _____ Section# _____ Lot# _____
Zoning District Classification _____
4. List specific Unified Development Ordinance Section(s) and subsection(s) from which a variance is requested.

5. For each Section/subsection listed above, describe with specificity how it applies to the property without the requested variance and how you propose it should be

varied by providing the type, dimension, amount and location of the variance requested. Attach a scale drawing using a current survey of the proposed placement of the structure for which the variance is being requested.

6. Is this variance request the result of a Notice of Violation issued by the Nags Head Department of Planning & Development? Yes ___ No ___ If yes, attach copy of Notice.
7. Explain how the variance request meets the approval criteria for the granting of a variance as set forth by the Town of Nags Head Code of Ordinances and Unified Development Ordinance by answering the following questions. Note that personal inconvenience or financial burden standing alone will not be considered as evidence in determining unnecessary hardship. Unnecessary hardship must be attributable to a unique or peculiar physical condition of the property that is not shared by other properties and has not been created by the actions of the applicant.

Describe the unnecessary hardship created on the property by the strict enforcement of the Unified Development Ordinance.

Explain how the property can be used if the variance **is not** granted.

Explain how the property can be used if the variance **is** granted.

Explain how the unnecessary hardship is not the result of your own actions.

Describe the conditions that are peculiar to the property, such as location, size, or topography which causes the unnecessary hardship.

Explain how the requested variance is consistent with the spirit, purpose, and intent of the Town's Unified Development Ordinance such that public safety is secured, and substantial justice is achieved.

Will the variance, if granted, allow an increase or extension of an existing nonconforming use on the property?

Will the variance, if granted, allow a use otherwise prohibited in the zoning district containing the property?

8. List the names and addresses of all abutting property owners and the owners of property immediately across the street from the property affected. The list shall be current according to the most recent tax listing abstract as filed in the office of the Dare County Tax Supervisor.

9. Are any attachments being submitted with this application? Yes____ No ____ If yes, please identify attachments and number of pages. _____

FILING OF APPLICATION

Variance applications are filed with the Nags Head Department of Planning & Development located at the Town of Nags Municipal Complex, 5401 South Croatan Highway, Nags Head, NC. Applications may be filed in person at the Department Monday through Friday during normal office hours or may be mailed to the Department at PO Box 99, Nags Head, NC 27959. In order for an application to be considered complete all questions and information requested in the application must be answered and provided. Applications must have original notarized signatures of the applicant and must be accompanied by the required application fee. Applications found to be incomplete will not be accepted and will be returned to the applicant.

SCHEDULING OF APPLICATION

Applications submitted by the monthly filing deadline will be placed on the following month's Board agenda. The monthly filing deadline and Board meeting dates for the year are listed in the "Planning and Development Submittal Dates" published annually. You may view these dates on-line at www.nagsheadnc.gov or receive a copy by contacting the Department at (252) 441-7016.

HEARING OF APPLICATION

The Board of Adjustment is a quasi-judicial body governed by the North Carolina General Statutes, Article 2 and Article 3 of the Unified Development Ordinance and the Board's own rules and procedures. The Board's regular meeting date is the second Thursday of each month at 9:00 a.m. The meeting is held in the Board Room located at the Town of Nags Head Municipal Complex. At the meeting the Board will hear testimony and receive evidence from the applicant, town staff and other interested parties. Board members cannot discuss any case with any interested parties or persons prior to the public hearing of the case. Any person who testifies at the hearing must be sworn in and any written or physical evidence presented to the Board will be retained by the Board.

BOARD DECISION

The concurring vote of a four-fifths majority of the board shall be necessary to grant a variance. The Board's decision will be made, reduced to writing, filed, served and subject to appeal in the manner provided by Section 3 of the Unified Development Ordinance. Decisions of the Board may be appealed by any aggrieved party to Superior Court within 30 days from the effective date of the Board's decision.

ADDITIONAL INFORMATION

Persons seeking additional information or assistance concerning variance applications should contact the Zoning Administrator at the Nags Head Department of Planning & Development at (252)441-7016.

CERTIFICATION

I certify that the information filed by me in this application is accurate to the best of my knowledge, information, and belief.

Property Owner Signature

Date

STATE OF _____, COUNTY OF _____

On this _____ day of _____, 20_____

_____ personally appeared before me and is known to me to be the person who signed the foregoing instrument and he/she acknowledged that he/she signed the same and being duly sworn by me, made oath that the statements in the foregoing instrument are true.

Signature of Notary Public _____

My Commission expires _____, 20_____

CERTIFICATION BY APPLICANT OTHER THAN PROPERTY OWNER

I _____ (your name) file this application on the behalf of _____ (property owner name).

I am the _____(attorney, contractor, etc.) for the property owner in this matter and file this application with the full knowledge and consent of the property owner. I certify that the information filed by me in this application is accurate to the best of my knowledge, information, and belief.

Signature

Date

STATE OF _____, COUNTY OF _____

On this _____ day of _____, 20_____

_____ personally appeared before me and is known to me to be the person who signed the foregoing instrument and he/she acknowledged that he/she signed the same and being duly sworn by me, made oath that the statements in the foregoing instrument are true.

Signature of Notary Public _____

My Commission expires _____, 20_____