



BZVD-25-3

Application for Variance
from Development

Standards

Status: Active

Submitted On: 1/17/2025


Primary Location


1166 E RIVER BLUFF LAKE DR
MADISON, IN 47250


Owner


CHEATHAM THOMAS M & LISA L
RIVER BLUFF LAKE DR 1166
MADISON, IN 47250-6639

Applicant

 Thomas Cheatham

 812-801-1175

 cheato4015@gmail.com

 1166 River Bluff Lake Dr
Madison , IN 47250

General Information

Are you the property owner?*

Yes

Property Owner Information

 Property Owner Name*

Thomas Mark Cheatham

Mailing Street Address*

1166 River Bluff Lake Dr

City*

Madison

State*

IN

Zip Code*

47250

Phone Number*

812-801-1175

Email

cheato4015@gmail.com

Permit Information

Address and/or Legal Description of Property*

1166 River Bluff Lake Dr

Zoning Classification*

Residential Agricultural

Description of Existing Use*

Residence.

Description of Proposed Use*

Single family dwelling.

List sections of the Zoning Ordinance for which a variance is requested*

6.11

Describe why a variance is requested*

Zoning Ordinance requires an acre of land for new construction. I am rebuilding my home in same location after a complete loss house fire. Ordinance doesn't seem to fit.

Is this application requesting a variance from setbacks?*

No



DOCKET ID ASSIGNED:
BZD-253

101 W Main St
Madison, IN 47250
(812) 265-8324

Application for Variance
from Development Standards

Application Fee	\$ 60.00
Ad Fee (for Legal Notice)	\$ 15.00
Recording Fee	\$ 25.00
Total Due	\$ 100.00

Paper applications will be accepted by the Office of Planning, Preservation, and Design; however, electronic submissions through our Permit Portal are preferred. This application can be submitted electronically at www.madison-in.gov/eportal.

Purpose: Per the City of Madison Zoning Ordinance, the Board of Zoning Appeals shall approve or deny variance from development standards from the terms of the Zoning Ordinance. The Board may impose reasonable conditions as a part of its approval. A variance may be approved only upon a determination by the Board.

This application must be filed at least 15 days prior to scheduled meeting to be eligible for consideration at that meeting. Actual deadlines vary due to holidays, office business hours and operating schedule, media publishing deadlines, etc. Deadlines are published publicly and can also be provided by contacting the Planning Office.

APPLICANT INFORMATION

Name: THOMAS MARK CHEATHAM
Street: 1166 RIVER BLUFF LAKE DR
City: MADISON State: IN Zip: 47250
Phone (Preferred): 812-801-1175
Phone (Alternate): _____
Email: CHEATS4015@GMAIL.COM

OWNER INFORMATION (IF DIFFERENT*)

Name: Same
Street: _____
City: _____ State: _____ Zip: _____
Phone (Preferred): _____
Phone (Alternate): _____
Email: _____

* If Applicant is not Owner, MUST submit documentation from owner authorizing applicant on their behalf.

PROPERTY FOR WHICH A VARIANCE IS REQUESTED

Address and/or Legal Description of Property: 1166 RIVER BLUFF LAKE DRIVE

Zoning Classification: RA

Description of Existing Use: RESIDENTIAL

Description of Proposed Use: SINGLE FAMILY DWELLING

List sections of the Zoning Ordinance for which a variance is requested: 6.11

Describe why a variance is requested: ZONING ORDINANCE REQUIRES AN ACRE OF LAND FOR NEW CONSTRUCTION. I AM REBUILDING MY HOME IN SAME LOCATION AFTER A COMPLETE LOSS HOUSE FIRE. ORDINANCE DOESN'T SEEM TO FIT

A Site Plan is **required** and must **include** the **distance** of the **closest** point from any existing or planned **structure** to each **property** line: For **Variance** from **Setbacks**, list below and indicate on Site Plan.

Current - North: _____ ft East: _____ ft South: _____ ft West: _____ ft
 Requested - North: _____ ft East: _____ ft South: _____ ft West: _____ ft

Per the City of Madison Zoning Ordinance, a variance shall not be granted unless the Board makes specific findings of fact based directly on the particular evidence presented to it, which support conclusions that the standards and conditions has been met by the applicant. These Findings of Fact are established and required by Indiana Code

Provide a **detailed Narrative statement demonstrating** that the requested **variance** conforms to the **following standards**. Respond to each **question** below with **Yes/No** and why. Use **additional** pages if necessary.

- Will this variance be injurious to the public health, safety, morals, and general welfare of the community?
NO. REBUILDING SAME FOOTPRINT THAT THIS HOUSE IS REPLACING
- Will the use and value of the area adjacent to the property included in the variance be affected in a substantially adverse manner?
NO. MY NEWER HOUSE SHOULD ENHANCE THEIR VALUE
- Will the strict application of the terms of the zoning ordinance result in practical difficulties in the use of the property?
YES. MY LOT IS LESS THAN 1 ACRE AND THE ORDINANCE STATES THAT ONE ACRE IS THE MINIMUM. THERE IS NO ADDITIONAL LAND AVAILABLE TO BUY.

Include any other **documents/information** which you feel will aid the Board in making its **determination**.

Certified letters **MUST** be mailed to adjoining property owners (includes owners of real estate at corners, across streets, alleys or easements as well as others who may share a common boundary) **at least ten (10) days** prior to the meeting. The Planning Office can assist you in obtaining this **information**. Proof of Certified Mail receipts and **corresponding** returned green cards shall be given to the Planning Office at least one (1) **working** day prior to the **scheduled meeting**. The Board will not review the application unless proof of attempt(s) of contact are **provided**. USPS delays will **not** be held against you if proof indicates that letters were sent **appropriately**.

I certify that the **information** provided in this **application** is true and accurate to the best of **my** ability and I **understand** and **agree** to the **Certified** mail stipulations.

1/17/24
Date

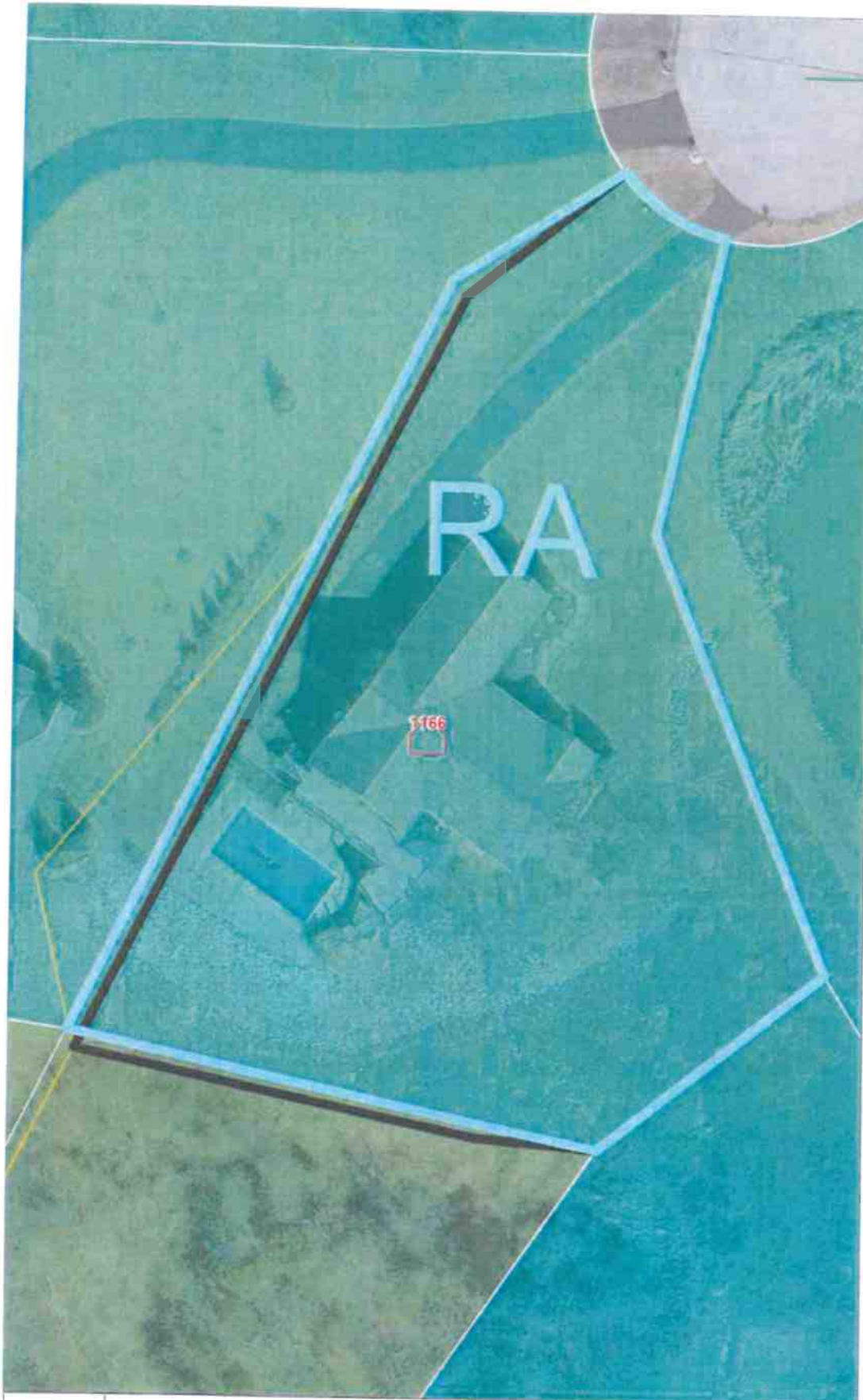
Thomas M. Chast
Signature of Applicant

COMPLETED BY PLANNING OFFICE	Meeting Information: Board of Zoning Appeals
Application Accepted on: <u>1/17/25</u>	101 W Main St, Madison, IN 47250 - Council Chambers
Application Accepted by: <u>Ray Dwayne</u>	Meeting Date: <u>2/10/25</u> Time: 6:00PM

Documentation Review (Completed by Planning Office)

- Owner Authorization provided (if req'd)
- Narrative Statements completed
- Site Plan is adequate
- Application is complete
- GIS Information to applicant and attached
- Certified Mail Receipts received (attach)
- Certified Mail Green Cards received (attach)

Staff Notes



- Madison Zoning**
 Zoning Code:
 HS
 RA
- Regional Counties
 County Boundary
 Townships
 Corporate **Boundaries**
 Water
 Parcels
 Drives, Alleys, etc.
 Addresses

- Regional Counties
 Regional Roads
 Regional **Highways**
 Water
 Railroad
 Drives, Alleys, etc.
 Roads
 Highways

