



**DOCKET ID ASSIGNED:**  
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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
<b>Total Due</b>	<b>\$ 100.00</b>

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/reporting](http://www.madison-in.gov/reporting).

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: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone (Preferred): \_\_\_\_\_  
Phone (Alternate): \_\_\_\_\_  
Email: \_\_\_\_\_

**OWNER INFORMATION (IF DIFFERENT\*)**

Name: \_\_\_\_\_  
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: \_\_\_\_\_

Zoning Classification: \_\_\_\_\_

Description of Existing Use: \_\_\_\_\_

Description of Proposed Use: \_\_\_\_\_

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

Describe why a variance is requested: \_\_\_\_\_

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.

1. Will this variance be injurious to the public health, safety, morals, and general welfare of the community?

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2. Will the use and value of the area adjacent to the property included in the variance be affected in a substantially adverse manner?

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3. Will the strict application of the terms of the zoning ordinance result in practical difficulties in the use of the property?

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*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.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

COMPLETED BY PLANNING OFFICE	Meeting Information: Board of Zoning Appeals
Application Accepted on: _____	101 W Main St, Madison, IN 47250 – Council Chambers
Application Accepted by: _____	Meeting Date: _____ 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