



**CITY OF NORFOLK
BOARD OF ZONING APPEALS**

**DEPARTMENT OF PLANNING & COMMUNITY
DEVELOPMENT**

5TH FLOOR, ROOM 508
810 UNION STREET
NORFOLK, VA 23510
(757) 664-4752
(757) 441-1569 (FAX)
WWW.NORFOLK.GOV/PLANNING

ZONING VARIANCES, APPEALS OR INTERPRETATIONS



Application Instructions

Application must be **typed or printed** and filled out completely. Incomplete application will delay the filing process. A filing fee of **\$100.00 must accompany the application.** The **original** and **one copy** of the application must be submitted along with **two copies** of the Survey (one being a 11x17 or smaller). The Survey **must be drawn to scale** to show the size and dimensions of the lot, all existing structures, all proposed structures, to include curb cuts, off-street parking, loading facilities, screening, and buffering. You must also provide **two copies** of all supporting documents that are filed with the application. **ALL DOCUMENTS submitted with application become the property of the Board and will not be returned.**

1. List full name of the applicant/applicants.
2. List the address of the property as shown on the real estate assessment plate.
3. Check the applicable item for this application.
4. List all lot numbers associated with the application, the block number, the lot size of each lot if more than one subdivision, and the present zoning of the land (i.e., C-2 – Corridor Commercial District).
5. List the present use of the property, the number of structures on the property and type (i.e., single family residence, duplex residence, garage, two story office building, etc.), and any improvements to the land.
6. List the proposed use of the property if the appeal is granted.
7. State the reason(s) this appeal should be granted. Additional sheets may be attached if necessary.

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Application Instructions Continued

7. State the reason(s) this appeal should be granted. Additional sheets may be attached if necessary.

Note 1: Members of the Board are appointed by the Circuit Court and are empowered to grant appeals **only if** the following conditions are found to exist:

- (a) That the strict application of the ordinance would produce undue hardship that would effectively prohibit or unreasonably restrict the utilization of the property when a property owner can show that the property was acquired in good faith and where by reason of the exceptional narrowness; shallowness; size or shape of a specific piece of property at the time of the effective date of the ordinance; or where by reason of exceptional topographic conditions or other extraordinary situation or condition of such piece of property, or of the condition situation or development of property immediately adjacent thereto, would produce undue hardship.
- (b) Property is found to be divided by zoning district boundary lines.
- (c) Error or interpretation of the Zoning Ordinance by the Zoning Administrator.
- (d) Uncertainty as to the exact location of zoning district boundaries.

Note 2: The Board **is not** empowered to grant appeals sought by an applicant for special privileges or conveniences. If any of the following examples apply, you are not eligible to apply for a variance.

- (a) No variance from rule against repairs/renovations to a nonconforming structure capped at 50% of assessed value.
 - (b) No variance to allow a use which is not permitted in the district.
 - (c) No variance from rule against having customers frequenting a residence in which a home occupation is conducted.
8. If an appeal has been filed for this property within the last year, list the date last filed.
9. Is the property under legal action or pending legal action? If so, list the type of action pending, i.e., violation notice for non compliance with construction code regulations; non compliance with zoning regulations; court order related to the specific property under appeal; etc. Please attach copies of notices.

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Application Instructions Continued

10. The applicant must sign and date application, provide a current mailing address, and provide a daytime telephone number, fax and email where you may be contacted. If applicant is different from property owner, property owner must sign and date application and provide a daytime telephone number, fax and email as well.
11. If the property owner elects representation before the Board by another party, this section must be completed.

Note: Property listed on this application will be photographed by this Department prior to the hearing date.

The Board of Zoning Appeals convenes at 10:00 am on the third Thursday of each month. A complete package (application, filing fee, site plan/survey, supporting documents and any other attachments) must be submitted to this office no later than 5:00 p.m. on the third Thursday of each month in order to be placed on the docket for the next month's hearing.

BOARD OF ZONING APPEALS PUBLIC HEARING

<u>FILING DEADLINE</u>	<u>HEARING DATE</u>
August 16, 2007	September 20, 2007
September 20, 2007	October 18, 2007
October 18, 2004	November 15, 2007
November 15, 2007	December 20, 2007
December 20, 2007	January 17, 2008
January 17, 2008	February 21, 2008
February 21, 2008	March 20, 2008
March 20, 2008	April 17, 2008
April 17, 2008	May 15, 2008
May 15, 2008	June 19, 2008
June 19, 2008	July 17, 2008
July 17, 2008	August 21, 2008

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Board of Zoning Appeals Application

1. Name of Applicant (print): _____

2. Address of Property (print): _____

3. I request that a hearing be scheduled before the Board of Zoning Appeals to hear a request for:

- a. ____ A variance from the regulations of the Zoning Ordinance.
- b. ____ An appeal from the decision of the Zoning Administrator
- c. ____ An interpretation of the Zoning District Boundaries.
- d. ____ An appeal of a Zoning Violation Notice.

4. Lot numbers _____ Block Number _____ Lot Size _____

Subdivision or Plat _____ Land Zoned _____

5. Present Use/Number of structures/Land Improvements:

6. List in detail why you are appearing before the Board of Zoning Appeals.

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Board of Zoning Appeals Application
Continued

ZONING VARIANCES, APPEALS OR INTERPRETATIONS

7. State the reason(s) this appeal should be granted. (Additional sheets may be attached)

8. Has an appeal been filed for this property within the last year? _____

9. Is this property currently under any legal action? If so, please explain.

10. I attest that all statements, documents, plans, and other supporting data relative to this appeal and submitted herewith are true to the best of my knowledge and belief.

(Signature of applicant) (Date application submitted)

(Mailing address- Include City, State & Zip Code) (Email Address)

Applicant – Please Print (Telephone) (Fax)

(Signature of property owner if different) (Date)

(Mailing address- Include City, State & Zip Code) (Email Address)

(Property Owner – Please Print) (Telephone) (Fax)

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Board of Zoning Appeals Application **Continued**

11. If the owner of the property elects representation before the Board by Counsel, Agent, or Others, acting on behalf of the owner, the following information must be provided.

(Signature of representative)

(Date application submitted)

(Mailing address- Include City, State & Zip Code)

(Email Address)

(Representative— Please Print)

(Telephone)

(Fax)

**Note: Property listed on this application will be photographed by
The Department of Planning & Community Development
prior to the hearing date.**

Revised—September 2007

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