



Madison County Planning Commission
16 E 9th Street, Box 13, Anderson, IN 46016

Ph: (765) 641-9541 Fax: (765) 648-1361 www.madisoncounty.in.gov

NO PARTIAL FILINGS WILL BE ACCEPTED

bzavar 2/14/11

For Office Use Only

Case #: _____

Hearing date: _____

Date fee paid: _____

Receipt #: _____

Approved _____ Denied _____

VARIANCE FROM DEVELOPMENT STANDARDS

Property Owner

Owner name: _____

Address: _____

Phone no(s): _____

Petitioner Information

Petitioner name: _____

Address: _____

Phone no(s): _____

Attorney/Contact Person and Project Engineer (if any)

Name: _____

Address: _____

Phone no(s): _____

Name: _____

Address: _____

Phone: _____

Attachments

- Completed Application
- Copy of Most Current Deed with Legal Description
- Letter of intent
- Site plan-drawn to scale (10 copies on 11x17 Paper)
- Application Fee

CRITERIA

1. Will the approval be injurious to the public health, safety, morals, and general welfare of the community?
2. Will the use and value of the area adjacent to the property included in the variance be affected in a substantially adverse manner?
3. Will the strict application of the terms of the zoning ordinance result in a practical difficulty in the use of the property?

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- Notice of Public Hearing
- Affidavit of Publication of Legal Notice
- Affidavit of Notice to Interested Parties

Project Information

Township & Section: _____

Acreage or lot size: _____ Parcel #: _____

Address/location: _____

Current zoning: _____ Current Use _____

Nature of variance/special use/appeal: _____

The undersigned states the above information is true and correct as (s)he is informed and believes.

Signature of Property Owner(s): _____ Date: _____

_____ Date: _____

_____ Date: _____

State of Indiana)
County of Madison)

SS: Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public
Residing in _____

Printed Name
My Commission expires: _____