



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

bzasuvar 2/14/11

For Office Use Only

Case #: _____

Hearing date: _____

Date fee paid: _____

Receipt #: _____

Approved _____ Denied _____

_____ **SPECIAL USE (EXCEPTION)**

_____ **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. Not injurious to public health, safety, morals & general welfare.
2. Requirements & development standards will be met
3. Granting will not subvert the general purposes of the Ordinance
4. Will not injure other property or uses in the same district & vicinity
5. Will be consistent with character of zoning district and Comprehensive Plan.

For Office Use Only

- 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 _____ County, IN Printed Name
My Commission expires: _____