



Planning, Zoning & Building Department  
501 Bay Isles Road  
Longboat Key, Florida 34228  
Fax Number: (941) 316-1970  
Web: <http://www.longboatkey.org>

(941) 316-1966

## APPLICATION FOR VARIANCE

Date Filed \_\_\_\_\_ Receipt # (\$1000.00 deposit) \_\_\_\_\_ Petition No. \_\_\_\_\_  
(Application fee of \$450 will be deducted from deposit)

**THE APPLICANT IS REQUIRED TO SUBMIT SEVENTEEN (17) (ORIGINAL PLUS SIXTEEN (16) COPIES) INDIVIDUAL, COLLATED SETS OF THIS APPLICATION, SUPPORTING PLANS AND DOCUMENTS.**

( I ) ( We ) \_\_\_\_\_ of \_\_\_\_\_  
(name) (mailing address)

\_\_\_\_\_ request a Variance from Section (s) \_\_\_\_\_,

of the Town of Longboat Key Zoning Ordinance to \_\_\_\_\_

(brief description, i.e., to reduce side yard from 20' to 15')

Subject property is located at \_\_\_\_\_  
(street number location)

The legal description is as follows: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Lot(s) ) (Block) (Subdivision or Plat)

or \_\_\_\_\_  
(if otherwise legally described)

LIST OF NAMES AND ADDRESSES OF ALL OWNERS OF PROPERTY WITHIN A DISTANCE OF 500 FT. FROM THE OUTSIDE EDGES OF THE PROPERTY INVOLVED WILL BE PROVIDED BY THE TOWN.

( I ) ( WE ) believe that the Zoning Board of Adjustment should grant this Variance pursuant to Section 158.029 of the Town Code because all of the following criteria are factually supported in this petition:

- (1) Special conditions and circumstances exist which are peculiar to the land, structure, or building involved and which are not applicable to other lands, structures, or buildings in the same zoning district.
- (2) The special conditions and circumstances do not result from the actions of the applicant.
- (3) Granting the variance requested will not confer on the applicant any special privilege that is denied by Chapter 158 to other lands, buildings, or structures in the same zoning district.
- (4) Literal interpretation of the provisions of Chapter 158 would deprive the applicant of rights commonly enjoyed by other properties in the same zoning district under the terms of Chapter 158 and would work unnecessary and undue hardship on the applicant.

- (5) The variance granted is the minimum variance that will make possible the reasonable use of the land, building or structure.
- (6) The grant of the variance will be in harmony with the general intent and purpose of Chapter 158, and the variance will not be injurious to the area involved or otherwise detrimental to the public welfare.

STATE SEPARATELY HOW EACH OF THE ABOVE SIX (6) CRITERIA ARE FACTUALLY PRESENT IN YOUR VARIANCE REQUEST:

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(ATTACH EXTRA SHEET, IF NECESSARY)

( I ) ( WE ) understand that this Petition becomes a part of the permanent records of the Zoning Board of Adjustment. ( I ) ( WE ) hereby certify that the above statements and the statements or showings made in any paper or plans submitted herein are true to the best of (my) (our) knowledge and belief.

\_\_\_\_\_  
(Signature of Owner)

\_\_\_\_\_  
(Please print or type Owner's Name)

Mailing address you wish information sent to and telephone number:

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Phone # ( ) \_\_\_\_\_

Fax # ( ) \_\_\_\_\_

\_\_\_\_\_  
The Owner has hereby designated the above signed person to act as his agent in regard to this Petition. (To be executed when Owner designates another to act on his behalf.)

\_\_\_\_\_  
Print or type Agent Name

**Notarization of Agent's Signature:**

State of \_\_\_\_\_

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

by \_\_\_\_\_

as \_\_\_\_\_ for \_\_\_\_\_  
(type of authority) (name of party acting on behalf of)

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Name of Notary (print, typed or stamped)

Personally know \_\_\_\_\_ OR produced identification \_\_\_\_\_ Type of Identification \_\_\_\_\_

**FOR STAFF USE ONLY**

Application Fee: \$ 1000.00 deposit\* \_\_\_\_\_ Receipt # \_\_\_\_\_  
(Application fee will be deducted from deposit)

Application and Plans Accepted By: \_\_\_\_\_ Date: \_\_\_\_\_

File Code/Number: \_\_\_\_\_

*\*Deposit required at time of formal submission*

At the conclusion of your plan review by the Town, you will be billed for additional staff time, Town Attorney cost, cost of advertising, and any other miscellaneous costs incurred with the processing of your application(s). Costs will be deducted from initial deposit. If costs exceed the initial deposit, you will be billed for the remaining costs incurred; or you will be refunded the unused portion of the deposit.