

For more information, see our website at: www.windemeretownship.com.

CHECKLIST

- ☐ Completed application form
- ☐ \$750.00 application fee *Checks Only – Payable to “Windemere Township”*
- ☐ Site plan or survey document, as indicated in Attachment A

APPLICANT INFORMATION

Name	Phone		
Mailing Address	City	State	ZIP
Email Address			

PROPERTY OWNERS NAME (IF DIFFERENT THAN ABOVE)

Site Address or Location	City	State	ZIP
Acres	Existing Land Use	Current Zoning	
Requested Action			

DESCRIPTION OF PROPOSED PROJECT:

SPECIFY THE SECTION OF THE ORDINANCE FROM WHICH THE VARIANCE IS SOUGHT:

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EXPLAIN HOW YOU WISH TO VARY FROM THE APPLICABLE PROVISIONS OF THE ORDINANCE:

PLEASE ANSWER THE FOLLOWING QUESTIONS AS THEY RELATE TO YOUR SPECIFIC VARINACE REQUEST:

1. In your opinion, is the variance in harmony with the purposes and intent of the ordinance? Yes () No ()

Why or why not?

2. In your opinion, is the variance consistent with the comprehensive plan? Yes () No ()

Why or why not?

3. In your opinion, does the proposal put property to use in a reasonable manner? Yes () No ()		
Why or why not?		
4. In your opinion, are there circumstances unique to the property? Yes () No ()		
Why or why not?		
5. In your opinion, will the variance maintain the essential character of the locality? Yes () No ()		
Why or why not?		
The Planning Commission must make an affirmative finding on all the five criteria listed above to grant a variance. The applicant for a variance has the burden of proof to show that all the criteria listed above have been satisfied.		
AGREEMENT		
I understand that by signing this form, the property in question may be visited by Windemere Township staff and board members throughout the application process. I certify that the information and exhibits submitted are true and correct to the best of my knowledge and that I am to file this application and act on behalf of the above signatures.		
The undersigned certifies that they are familiar with application fees and other associated costs, and also with the procedural requirements of the Zoning Code and other applicable ordinances.		
*Applicant Name	*Applicant Signature	*Date
*Fee Owners Name	*Fee Owners Signature	*Date
-FOR OFFICE USE ONLY-		
Date Received:	File #:	

Attachment A: Site Plan Sketch

Sketch your site plan below or submit professionally drafted plan or survey document. Please note that structure blueprints are not required.

Site plans must include the following as measured in feet:

1. Dimensions of the parcel
2. The proposed structure(s)
3. All existing structures
4. Distance of proposed structure(s) to the following:
 - A. Property lines
 - B. Road right-of-way
 - C. Existing structures
 - D. Sewage treatment system(s), existing and proposed
 - E. Water supply system
 - F. Lakes, rivers, streams, or any wetlands
5. Location of water supply and sewage treatment systems within 150' of the subject parcel.
6. Location of any public or private easements including drainage, utility, road or access.

