



City of Freeport, IL

Variance Application

\$50 filing fee due for residential variance; \$100 filing fee due for non-residential variance at application submittal

Applicant Name: _____

Phone Number: _____ Email: _____

Property Address: _____

PIN #: _____

Legal Description of Property:

Current Zoning District: _____

Requested Variance from the City of Freeport Zoning Code [please include reference to specific section of Ordinance from which you are seeking a variation from]:

*Attach a site plan or plat to depict the proposed Variance and plan for the property. Attach a project narrative on an extra sheet if necessary.

Please address the following items (attach additional sheets as necessary):

Is the proposed variance in harmony with the general purpose and intent of the City of Freeport Zoning Code, why or why not?

Will strict enforcement of the City of Freeport Zoning Code result in practical difficulties or impose exceptional hardships due to special and unusual conditions which are not generally found on other properties in the same zoning district, why or why not?

Could the property yield a reasonable return if permitted to be used only under the conditions allowed by this Zoning Code, why or why not?

Is the plight of the ownership of the property seeking the variance due to unique circumstances, why or why not?

If the variance is granted, will it alter the essential character of the neighborhood, and will it be a substantial detriment to adjacent property, why or why not?

How does the proposed Variance relate to the existing uses and zoning of nearby property? [How similar is the structures and/or activities you are proposing compared to those of nearby properties in the neighborhood?]

Will the proposed Variance diminish property values of nearby parcels, why or why not? If yes, to which extent? [Will the proposed structures and/or activities lower the property values of nearby land?]

Will the proposed Variance impose a relative hardship on adjacent or nearby property owners by reason of the proposed use, why or why not? [Will the proposed structures and/or activities negatively impact nearby property owners by way of visual, noise, noxious or other similar disturbance?]

How well suited is the subject property for the proposed Variance? [How does the proposed structures and/or activities relate to the size, location, physical characteristics, etc. of the property?]

If the property is vacant: How long has it been vacant as zoned, considering the context of land development in the vicinity of the subject property? [If the property has been vacant, how long has it been vacant compared to nearby properties?]

What is the community's need for the proposed use? [Why does the neighborhood need the proposed structure and/or activities?]

How does the proposed Variance relate to the City of Freeport's Comprehensive Plan? [How do the proposed structures and/or activities relate to contents of the City's most recent Comprehensive Plan {A copy of the Comprehensive Plan is available at City Hall, or online on the City's website}].

Signature: _____

Date: _____

For Office Use Only

Date Received: _____

Zoning Board of Appeals Meeting Date: _____

Planning Commission Meeting Date: _____

City Council Meeting Date: _____

Ordinance Number: _____



**CITY OF FREEPORT, ILLINOIS
DEPARTMENT OF COMMUNITY DEVELOPMENT**

City Hall Building • 314 West Stephenson Street, St 110 • Freeport, IL 61032
Telephone (815) 235-8202 • Fax (815) 599-5819

ATTACHMENT B

LETTER OF AUTHORIZATION

DATE: _____

TO: The City of Freeport

This letter authorizes _____

to prepare and submit an application for a Zoning Variance for _____

being lot # _____, block # _____, PIN # _____

Subdivision _____

for processing.

Signature

Signature

Printed Name of Owner

Printed Name of Owner

Address

Address

City, State & Zip Code

City, State & Zip Code

STATE OF ILLINOIS

)

)

ss.

STEPHENSON COUNTY

)

BEFORE ME, a Notary Public in and for said County and State, the undersigned authority, on this day personally appeared _____ known to me to be the person whose signature is subscribed to the foregoing instrument.

GIVEN UNDER MY HAND AND SEAL this _____ day of _____, _____.

SEAL

Notary Public

My commission expires: _____



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ATTACHMENT C

NOTICE

TO _____

On _____, _____, an application for (applicant name) _____ was filed in the Department of Community Development in the City Hall Building, Freeport, Illinois. All of the said documents may be examined during business hours in the Community Development Office, 314 West Stephenson Street, Freeport, IL 61032.

A Public Hearing will be held by the City of Freeport Board of Zoning Appeals in the City Council Chambers, City Hall Building, 314 West Stephenson Street, Freeport, Illinois, on the said documents on _____, _____ at _____ p.m.

The real estate that is the subject matter of the pending action is described as follows:

ADDRESS: _____

LEGAL DESCRIPTION: _____

The relief sought by the documents on file is a Zoning Variance to allow _____
_____ in a _____ zoning classification.

DATED: _____, _____.



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ATTACHMENT D

LIST OF NAMES AND ADDRESSES

The following is a list of the names and addresses of property adjacent to, contiguous to, or across any street, river, creek or public way from any part of the land or property described in the petition for Zoning Variance.

PROPERTY IDENTIFICATION NUMBER (PIN)	STREET ADDRESS OR OTHER LEGAL DESCRIPTION OF ADJACENT/CONTIGUOUS PROPERTY	NAME OF PROPERTY OWNER	ADDRESS OF PROPERTY OWNER



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ATTACHMENT E

AFFADAVIT OF MAILING NOTICE

STATE OF ILLINOIS)
)
STEPHENSON COUNTY) ss.

The undersigned, being first duly sworn on his oath deposes and says that on _____, _____, he/she mailed a notice, a true and complete copy of which is attached hereto and made a part hereof, to each of the following named person(s), fully and completely addressed, with postage prepaid, to the address shown, by United States Post Office mail.

PROPERTY IDENTIFICATION NUMBER	NAME	ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature of Affiant

SUBSCRIBED and sworn to before me this _____ day of _____, _____.

Notary Public