



VARIANCE APPLICATION

Howey-in-the-Hills

PLEASE PRINT LEGIBLY

Property Owner (if there are multiple owners, please provide all the information on the attached ownership list): _____

Property Owner's Contact Information (If multiple owners, please provide mailing address, daytime phone, and fax and/or email for each owner):

First Owner: _____

Mailing Address: _____

Daytime Phone: _____

Fax and/or Email: _____

Second Owner: _____

Mailing Address: _____

Daytime Phone: _____

Fax and/or Email: _____

If more than two owners, please attach additional information.

Applicant (If different from owner): _____

Mailing Address: _____

Daytime Phone: _____

Fax and/or Email: _____

If the Applicant does not own the property, or is not the sole owner, please complete the Authorized Agent Affidavit form, attached.

If the Applicant is Not the Owner of the Property, is the Applicant:

- _____ A Tenant
- _____ An Authorized Agent for the Owner
- _____ Other (please explain): _____

Property's Physical Address: _____

The attached Verified Legal Description Form must also be completed as part of the application.

A survey of the property, showing all current improvements on the site, to scale, is required as part of the application submittal. The survey can be no larger than 11" X 17" in size.

An additional copy of the survey or a site plan drawn to scale should be included as part of the application which specifically shows any improvements that are being requested as part of the variance. Again, this site plan can be no larger than 11" X 17" in size.

Property Information: Tax Parcel ID: _____ Alt Key #: _____

Please identify below the current land uses located on the site and all adjacent properties. For example, land uses would be identified as single family home, office, grocery store, etc.

Subject Site: _____

Adjacent property to the North: _____

Adjacent property to the South: _____

Adjacent property to the East: _____

Adjacent property to the West: _____

Does the property currently have:

Town Water:	_____	YES	_____	NO
Central Sewer:	_____	YES	_____	NO
Potable Water Well:	_____	YES	_____	NO
Septic Tank:	_____	YES	_____	NO

How long has the current owner owned the property? _____

Please attach property tax records or other documentation to verify how long the current owner has owned the property.

What specific Code requirement is the applicant seeking a variance from?

What, in the applicant's point of view, are the specific special conditions or circumstances that exist on the property?

What, in the applicant's point of view, is the unnecessary and undue hardship that exists to provide justification for the variance?

The applicant should provide any additional information that may be helpful to the Town in rendering a decision on the requested variance.

Additional information may be necessary. The applicant is required to provide a daytime telephone number where he/she can be reached.

The applicant is required to provide the names and mailing addresses of all property owners within 300 feet of the subject property, in the form of mailing labels. Three (3) sets of labels are required. These names and addresses may be obtained from the Lake County Property Appraiser's Office.

The Town will also provide a sign which must be posted on the subject property, visible from the adjacent right-of-way or road access. The sign must be posted at least one week prior to the Planning and Zoning Board meeting where this application will be on the agenda and the sign must remain posted until the Town Council public hearing.

A \$400 application fee is due and payable at the time this application is submitted to the Town. In addition to this application fee, a \$1,000 review deposit is required. By signing this application, the applicant acknowledges that the \$400 application fee covers advertising costs, mailings, and the time spent on the application by the Town Clerk. The applicant also acknowledges by his/her signature below that he/she understands he or she will be responsible for any additional costs that the Town incurs as a result of having Town consultants review the application. Once those additional costs are paid by the applicant, the Town will return the balance of the \$1,000 review deposit to the applicant. By signing this application, the applicant also acknowledges that he/she understands that variances expire if not acted upon within the timeframes outlined in the Town's Land Development Regulations.

Witnesses:

Applicant:

Signature

Signature

Print Name

Print Name

Signature

Print Name

Please hand deliver completed application and fee to:

Town Clerk
Town of Howey in the Hills
101 N. Palm Avenue
Howey in the Hills, FL 34737

Please make application fee and review deposit checks payable to the Town of Howey in the Hills.

The Town Clerk may be reached at 352-324-2290 or by visiting Town Hall during normal business hours.

FOR TOWN CLERK OFFICE USE ONLY

Date Received: _____

- _____ 3 sets of labels attached?
- _____ current survey attached?
- _____ site plan attached showing proposed improvements?
- _____ verified legal description form attached?
- _____ authorized agent affidavit attached?
- _____ ownership list attached?

APPLICATION NO. _____

Reviewed and Accepted By: _____

Provided to Town Planner on: _____

Planning & Zoning Board meeting date: _____

Town Council meeting date: _____



Authorized Agent Affidavit

**STATE OF FLORIDA
COUNTY OF LAKE**

Before me, the undersigned authority, this day personally appeared _____ hereinafter "Owner", and _____ hereinafter "Applicant", who, being by me first duly sworn, upon oath, depose and says:

1. The Applicant is the duly authorized representative of the Owner, on the real property as described and listed on the pages attached to this affidavit and made a part of hereof.
2. That all Owners have given their full and complete permission for the Applicant to act in their behalf as set out in the accompanying application.
3. That the attached ownership list is made a part of the Affidavit and contains the legal description(s) for the real property, and the names and mailing addresses of all Owners having an interest in said land.

FURTHER Affiant(s) sayeth not.

Sworn to and subscribed before me this
____ day of _____, 20__

Owner

Notary Public
State of Florida at Large
My Commission Expires: _____

Sworn to and subscribed before me this
____ day of _____, 20__

Owner

Notary Public
State of Florida at Large
My Commission Expires: _____

Sworn to and subscribed before me this
____ day of _____, 20__

Owner

Notary Public
State of Florida at Large
My Commission Expires: _____

Sworn to and subscribed before me this
____ day of _____, 20__

Owner

Notary Public
State of Florida at Large
My Commission Expires: _____



Ownership List

(must be completed by all owners)

Owner's Name: _____

Ownership Interest: _____

Mailing Address: _____

Legal Description: _____

Signature

Date

The foregoing instrument was acknowledged before me on _____ by
_____ who is personally known to me or has presented
_____ as identification and who did _____ or did _____ not
take an oath.

Notary Public

Seal

Owner's Name: _____

Ownership Interest: _____

Mailing Address: _____

Legal Description: _____

Signature

Date

The foregoing instrument was acknowledged before me on _____ by
_____ who is personally known to me or has presented
_____ as identification and who did _____ or did _____ not
take an oath.

Notary Public

Seal

MULTIPLE COPIES OF THIS FORM MAY BE MADE AND ATTACHED AS NECESSARY.