Board of Zoning Appeals Variance Application City of Isle of Palms

Application Number:	Date Filed:
Applicant Information	
Applicant Name:	
Phone Number:	
Email Address:	
Property Information	
Property Owner or Representative:	
Subject Property Address:	
Zoning District:	

Description of Variance Request

Please describe the variance request in detail. Please include the zoning ordinance section number and any supporting documentation for your request (site plan, pictures, letters of support, etc.). You may attach a separate sheet if necessary.

Variance Approval Criteria

A variance may be granted in an individual case of unnecessary hardship if the Board finds that all five of the approval criteria are met. Please explain how your variance request meets all five criteria below.

Please note that the Board may not grant a variance which has the effect of allowing the establishment of a use not otherwise permitted in a zoning district, to physically extend a nonconforming use, or to change the zoning district boundaries shown on the official zoning map. The fact that property may be utilized more profitably if a variance were granted shall not be considered as a ground for a variance. A claim of unnecessary hardship cannot be based on conditions created by the applicant. A claim of unnecessary hardship cannot be based on financial hardship of the applicant.

1. Are there extraordinary and exceptional conditions that pertain to this piece of property?

2. Do these conditions generally apply to other property in the vicinity or are they unique to the subject property?

3. Because of these extraordinary and exceptional conditions, would the application of this Ordinance effectively prohibit the utilization of the property?

4. Because of these extraordinary and exceptional conditions, would the application of this Ordinance unreasonably restrict the utilization of the property?

5. Will the authorization of a variance be a substantial detriment to adjacent property or to the public good? Will the character of the zoning district be harmed if this variance is granted?

Applicant Signature: _____

Date: _____