

Town of Georgetown Building Department 9111 St Rd 64 PO Box 127

Georgetown, IN 47122 Phone: (812) 951-3012 ext 3 buildingdept@georgetown.in.gov

Special Exception (Variance of Use)

Please Note:

Applicant:

This Application is a document of public record. Any information disclosed on this application is available for review by the public. Incomplete applications will not be accepted. A pre-submission meeting with Building and Development Staff is strongly encouraged. Please contact the office at 812-951-3012 ext 3 to schedule a meeting.

Special Exception: A variance of use from a base zoning district's permitted or conditional uses.

1. General Information:

Applicant Address:				
Applicar	nt Phone:			
Applicant Email:				
Applicant	t's Interest in Property:			
Owner	Option Holder	Purchase Agreement	Legal Representative	Other
Owner(s)	of Property: (complete	e this section if <i>owner</i> is diff	ferent than applicant)	
Owner Name:				
Owner Address:				
Owner l				
Owner l	Email:			
Owner l	Email: L's Representative:			
Owner I Applicant Represe	Email: t's Representative: entative Name:			
Owner I Applicant Represe Represe	Email: L's Representative:			
Applicant Represe Represe Represe	Email: L's Representative: Entative Name: Entative Address			
Applicant Represe Represe Represe Represe	Email: L's Representative: entative Name: entative Address entative Phone:			
Applicant Represe Represe Represe Represe Represe Represe	Email: It's Representative: Entative Name: Entative Address Entative Phone: Entative Email: Formation:			
Applicant Represe Represe Represe Represe Represe Applicant	Email: L's Representative: Entative Name: Entative Address Entative Phone: Entative Email: Cormation: D Number:			
Applicant Represe Represe Represe Represe 2. Site Inf Parcel III	Email: L's Representative: Entative Name: Entative Address Entative Phone: Entative Email: Cormation: D Number: E of Property/Location:			
Applicant Represe Represe Represe Represe 2. Site Inf Parcel III	Email: L's Representative: Entative Name: Entative Address Entative Phone: Entative Email: Cormation: D Number:			

3. Special Exception Request:
Detail the special exception request:
4. Special Exception Justification:
Indiana Code and the Georgetown Zoning Ordinance establishes specific criteria that each must be met in order for a Special Exception (Use Variance) to be approved. Describe how the request meets each of the following criteria:
1. The special exception will not be injurious to the public health, safety, morals, and general welfare of the community:
2. The use and value of area adjacent to the property will not be adversely affected in a substantially adverse manner:
3. The need for the special exception (variance of use) arises from some condition peculiar to the property involved:
4. The strict application of the terms of the Georgetown Zoning Ordinance would result in an unnecessary hardship in the use of the property:

5. Approval of the Special Exception will not contradict Comprehensive Plan:	the goals and objectives of the Geogetown
5. Required Documents:	
<u> </u>	
\$500.00 Filing Fee Deed for subject property	
Affidavit of Ownership (if applicable)	
Site plan drawn to scale, signed, and dated which of	learly shows the entire layout of the property an
all features relevant to the request.	sicurity shows the entire layout of the property an
Floor plan, including specific dimensions for any bu	uildings on the property subject to the conditiona
use.	
Cover letter summarizing the request.	
For proposals using septic systems, a letter from the	
provided verifying that any proposed development	
For proposals using sanitary sewer systems, a lette	
verifying that any proposed new development will	be served.
6. Signature:	
The undersigned states that the above information is t	rue and correct.
Name:	
Signature:	Data
Jigiliatul C.	Date:
THE COURT AND CWODN DEFORE ME	
UBSCRIBED AND SWORN BEFORE ME	
THIS DAY OF, 202	
IOTARY BURIEC COUNTY OF	
NOTARY PUBLIC COUNTY OF	
MY COMMISSION EXPIRES	

Georgetown Plan Commission Georgetown Board of Zoning Appeals



AFFIDAVIT OF OWNERSHIP

If the owner(s) of the subject property are giving authorization for someone else to apply for this request, this attached attachment is to be completed and submitted at the time of the application. I (We), ______, do hereby certify that I am (we are) (Owners of subject property) the owner(s) of the property legally described as ______(Parcel ID Number) And hereby certify that I (we) have given authorization to ____ (Applicant/Petitioner/Representative) To apply for the included application on this subject property. Name of Owner(s): Parcel I.D. No: Signature: Date: STATEOF_____) SS: COUNTY OF _ Subscribed and sworn to before me, a Notary Public within and for said County and State, this ______, 202____. MY COMMISSION EXPIRES: Notary Public MY COUNTY OF RESIDENCE: Printed Signature