Variance Application

File Name: _____

File Number: _____

Date Stamp

Applicant is seeking a relief of the Code of the City of Milford; Part II General Legislation:

Chapter_____, titled _____,

Article _____, titled _____; **Section** _____, **Subsection** _____, which states:

Applicant is requesting to be allowed (Example: Variance from the 10 foot required side setback):

A Land Use Application for a Variance is deemed complete when it is accompanied by the required items identified below. Please be advised that additional information may be required during the review process in order to respond to or resolve particular issues. No application shall be considered complete if any of the required information is missing.

REQUIRED ITEMS	For Staff Use ONLY	
	Verified	Waived
□ 1. Land Use Application Cover Sheet.		
□ 2. Three folded copies of a site plan (no larger than 11" x 17"), drawn to scale, showing:		
A. Existing and proposed structures and other improvements;		
B. The location of existing and proposed parking;		
C. Existing and proposed utilities;		
D. Existing natural features.		
□ 3. State Exceptional Practical Difficulty based on the following 4 criteria:		
A. The nature of the zone where the property lies;		
B. The character and uses of the immediate vicinity;		
C. Whether removal of the restriction on the applicant's property would seriously affect the neighboring properties;		
D. Whether failure to remove the restriction would create unnecessary hardship or exceptional practical difficulty for the owner in relation to the owner's efforts to make normal improvements to the property. Economic hardship, standing alone, may justify granting an area variance and the inability to improve one's business or to stay competitive as a result of area limitations may qualify as a legitimate exceptional practical difficulty.		
□ 4. Application fee.		

I/We certify that the information provided in this application, including all submittals are attachments, is true and correct to the best of my/our knowledge.

Signature of Legal Owner(s): _____ Date: _____

Signature of Applicant(s): _____ Date: _____

REVISED: 05.2016

201 South Walnut Street – Milford, DE 19963
Phone: 302.424.3712 Fax: 302.424.3558 www.cityofmilford.com