City of St. Charles PO Box 58 St. Charles, Idaho (208)945-9636



ALAN MICHAELSON, MAYOR

DALLAS ARNELL

JESS JOHNSON

KENT WILKES

KIT ANDERSEN

VARIANCE REQUEST APPLICATION

Applicant Information		Date of application:	
Name of Property Owner:			
Mailing Address:			
City:	State:	Zip Code:	
Phone: () Fax: ()	Cell: ()	
E-mail Address: (optional)			
This application must be filled out in detail ar accompanied by a nonrefundable fee of \$100.		clerk for the City of Saint (Charles, Idaho,
Total Fees: \$			
Date Paid:			
State the precise nature of the variance physical hardship, inconsistent with the sought, together with any other informa matter, (attach additional pages if necessary)	specific regulation considered	ion for which the varia	ince is being

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This application must be accompanied by an accurate scale drawing of the site and any adjacent property affected, showing all existing and proposed locations of streets, easements, property lines, uses, structures, driveways, pedestrian walks, off-street parking and off-street loading facilities and landscaped areas.

This application will be referred to the Saint Charles City Council for its consideration. The City Council shall hold a public hearing on the application and it shall be granted or denied. Notice of the public hearing shall be sent to adjacent property owners no less than 10 or more than 30 days prior to the hearing. You will be given notice of the public hearing and should be present to answer any questions.

A variance shall not be considered a right or a special privilege, but will only be granted upon the showing of undue hardship because of 1) special characteristics of the site, which deprive it of privileges commonly enjoyed by other properties in the same zone or vicinity, and 2) the variance is not in conflict with the public interest. Variances are not intended to allow something that others do not have a permitted right to do. The use or construction permitted by a variance must be commenced within a 12-month period. If such use or construction has not commenced within such time period the variance shall no longer be valid.

Applicant signature:	
X	Date:
I certify that I have provided accurate inform	ation as required by this application form, to the best of my ability.

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Project Layout

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