

### Dates to Remember for Area-Bulk Variance

1. \_\_\_\_\_ - By Noon  
Last day to have completed variance application, building permit application with 8 ½" x 11" site plan, \$225.00 filing fee, and Buffered Parcels Report from St. Clair County Mapping & Platting listing the legal property owners and mailing addresses of the parcels within 250 feet of the property in to Jennifer or Vicki in the Planning & Zoning Office. Please also provide proof of applicant's property interest if the applicant is not the owner. You may also provide a copy of your Notice of Intent for review at this time.
  
2. \_\_\_\_\_ - to \_\_\_\_\_ -  
"Window" for petitioner to send "Notice of Intent" notices to owners within 250 feet of parcel, either in person to owner **OR** by Certified Mail Return Receipt Requested. See Section 8.06 and sample letter attached for notice requirements.
  
3. \_\_\_\_\_ (Wednesday before the hearing) - **To Vicki:**
  - > Copy of letter **AND** all green Certified Mail Return Receipts (or envelope returned from Post Office as refused) with receipt showing date received at Post Office attached to each one – **OR** - the original letters signed by owners presented in person.
  - > Statement of Compliance certifying that you have done all that is required of you as outlined in Article 8. See the attached sample.
  
4. \_\_\_\_\_ -  
Public Hearing with Zoning Hearing Officer (City Council Chambers @ 5:00 p.m.)

If you have any questions regarding your petition, please do not hesitate to contact Jennifer Howland or Vicki Evans at (618)624-4500, Extension 4. You may wish to call our office to ensure either Jennifer or Vicki will be available when you come in to file.

A copy of the agenda will be mailed to you Friday before the scheduled meeting. The agenda will serve as notice that your petition will be discussed that night. You will want to attend that meeting or have a representative present in your place.

The Zoning Hearing Officer will make his/her decision and will forward the finding of facts and the decision to the Planning & Zoning Office within a few days of the hearing. We will contact you as to the outcome of the Zoning Hearing Officer's decision and if there are any terms or conditions for approval.

PETITION FOR AREA-BULK VARIANCE

Planning & Zoning Department, O'Fallon City Hall
255 South Lincoln Avenue, 2nd Floor
O'Fallon, IL 62269 Phone (618) 624-4500 Ext. 4

Variance Request No. \_\_\_\_\_
Date: \_\_\_\_\_

(Do not write in this space -- For office use only)

Date set for hearing: \_\_\_\_\_

Perm. Parcel No. \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

Date hearing held: \_\_\_\_\_

Fee paid: \$\_\_\_\_\_ Date: \_\_\_\_\_

Newspaper: \_\_\_\_\_

Building Permit App. No. \_\_\_\_\_

Action by Zoning Hearing Officer:

Comments: (indicate other actions such as continuances)

( ) Denied

\_\_\_\_\_

( ) Approved

\_\_\_\_\_

( ) Approved with modification

\_\_\_\_\_

INSTRUCTIONS TO APPLICANTS: All information required by the application must be completed and submitted herewith. Applicants are encouraged to visit the Planning & Zoning Office for any assistance needed in completing this form.

1. Name of property owner(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

2. Applicant's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_ E-Mail: \_\_\_\_\_

3. Property interest of applicant (Owner, Contractor, etc.): \_\_\_\_\_

4. With respect to any portion of these premises, a previous appeal or petition for variance was made:

( ) No. ( ) Yes. If "yes", list all previous appeals and/or petitions, giving dates:

\_\_\_\_\_
\_\_\_\_\_

5. Address of property: \_\_\_\_\_

Present use of property: \_\_\_\_\_ Parcel (Tax) ID #: \_\_\_\_\_ Zone District: \_\_\_\_\_

6. Do the existing structures comply with all area and bulk regulations for the zone district in which it is located? ( ) Yes ( ) No

If "no", specify each non-conforming condition:

\_\_\_\_\_
\_\_\_\_\_

7. Variance requested: \_\_\_\_\_

\_\_\_\_\_

8. Are the conditions of hardship for which you request a variance peculiar only to the property described by this petition?

( ) Yes. ( ) No. If "no", how many other properties are similarly affected? \_\_\_\_\_

9. A sketch plan (drawn to approximate scale) shall be shown on the reverse side or may be attached showing the following:

- a) Dimensions of the zoning lot;
b) Dimensions and use of all buildings;
c) Location of proposed use requiring a variance;
d) Any additional information as may be reasonably required by the Planning & Zoning Department.

10. A use variance is requested for the property described above in conformity with the documents submitted herewith.

I certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and accurate.

I consent that the entry in or upon the premises described in this application by any authorized official of O'Fallon, Illinois for the purpose of inspecting or of posting, maintaining, and removing such notices as may be required by law.

Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_

APPLICATION FOR RESIDENTIAL BUILDING PERMIT / CERTIFICATE OF ZONING COMPLIANCE

Planning & Zoning Department, O'Fallon City Hall
255 South Lincoln Avenue, 2nd Floor
O'Fallon, IL 62269 Phone (618)624-4500 Ext. 4

(Do not write in this space -- For office use only)

Date: \_\_\_\_\_, 20\_\_\_\_ Zoning fee to be paid to City Clerk
( ) Permit issue No. \_\_\_\_\_ \$ \_\_\_\_\_ Date: \_\_\_\_\_
( ) Permit denied \_\_\_\_\_ If denied, cause of denial: \_\_\_\_\_
( ) Application appealed No. \_\_\_\_\_
Variance or Special Permit No. \_\_\_\_\_

\* \* \* \* \*

- 1. Name of property owner(s): \_\_\_\_\_ Phone: \_\_\_\_\_
Complete mailing address: \_\_\_\_\_ E-Mail: \_\_\_\_\_
2. Applicant ( Owner Contractor): \_\_\_\_\_ Phone: \_\_\_\_\_
Complete mailing address: \_\_\_\_\_
3. General contractor's name/Agent/Responsible party: \_\_\_\_\_ E-Mail: \_\_\_\_\_
Complete mailing address: \_\_\_\_\_ Phone: \_\_\_\_\_
4. Property address (9-1-1 approved) of proposed construction: \_\_\_\_\_
5. Legal description: Parcel #: \_\_\_\_\_
Lot # and subdivision name including addition: \_\_\_\_\_
6. Proposed construction or use (please check all that apply):
( ) Structural
( ) Electrical - Contractor's name and phone: \_\_\_\_\_
( ) Plumbing - Contractor's name, phone, and IL License #: \_\_\_\_\_

New residence - Model name or number \_\_\_\_\_ If multi-family, # of units \_\_\_\_\_
Have the building plans been previously approved by the City? ( ) yes ( ) no If yes, any alterations? ( ) yes ( ) no
( ) Addition ( ) Remodel ( ) Accessory structure ( ) Deck

Project description: \_\_\_\_\_
Cost of improvement: \$ \_\_\_\_\_ Zone district: \_\_\_\_\_ Flood zone: \_\_\_\_\_
Type of structure: ( ) Ranch ( ) 2-story ( ) Split-foyer ( ) Basement ( ) Crawl space ( ) Slab
Sq. ft. area of living space: 1st floor \_\_\_\_\_ 2nd floor \_\_\_\_\_ Total of both: \_\_\_\_\_
Basement area sq. ft.: Finished \_\_\_\_\_ Unfinished \_\_\_\_\_ Total basement \_\_\_\_\_
Garage area: \_\_\_\_\_ sq. ft. Deck area: \_\_\_\_\_ sq. ft. Covered porch area: \_\_\_\_\_ sq. ft.
Accessory structures area and descriptions: \_\_\_\_\_ sq. ft.
Total lot area: \_\_\_\_\_ sq. ft. Total lot covered by all buildings after construction: \_\_\_\_\_ sq. ft.
Percent of lot coverage (total lot area covered by all buildings divided by total lot area): \_\_\_\_\_

7. A site plan accompanying your application is required. Please provide the site plan drawing on a separate page if the space below is insufficient (graph paper is available upon request.) Drawn to approximate scale, please include the following:
  - a) Dimensions of the zoning lot;
  - b) Dimensions and use of all buildings (show overall dimensions of house including garage if applicable);
  - c) Distance of each building from all zoning lot lines;
  - d) Distance between principal buildings and accessory structures;
  - e) Distance of principal building from principal buildings on adjacent lot(s);
  - f) Location of driveways and off-street parking spaces (show distance from lot lines and overall dimensions);
  - g) Location of all easements (drainage and utility);
  - h) Any additional information as may be reasonably required by the Planning & Zoning Department and applicable requirements of Section 2.04(e).

**PLEASE NOTE: Sidewalk cross slope ¼” per foot maximum. Adjust driveway slopes and building elevations accordingly. All residential driveways serving new homes, or additions of residential attached or detached garages, must be constructed of concrete or asphalt and must be located a minimum of 3 ft. from adjoining property line.**

8. Silt control and erosion control measures are to be maintained at all times. I acknowledge that the failure to erect or maintain silt/erosion control at all times may result in citations being issued by the City of O’Fallon indicating a violation of City of O’Fallon Subdivision and Development Control Ordinance #3319, Development Manual, Section 4.
9. Application is hereby made for a Temporary Certificate of Zoning Compliance, as required under the Zoning Ordinance of the City of O’Fallon, Illinois, for the erection, moving or alteration, and use of buildings and premises. In making this application the applicant represents all of the above statements and any attached maps and drawings to be a true description of the proposed new or altered uses and/or buildings. The applicant agrees that the permit applied for, if granted, is issued on the representations made herein and that any permit issued may be revoked without notice on any breach of representation or conditions. It is understood that any permit issued on this application will not grant right of privilege to erect any structure or to use any premises described for any purpose or in any manner prohibited by the Zoning Ordinances, or by other ordinances, codes or regulations of O’Fallon, Illinois.

(Applicant) \_\_\_\_\_

(This space is for additional information you wish to provide on this project.)

### TEMPORARY CERTIFICATE OF ZONING COMPLIANCE

The plans and specifications submitted with this Application are in conformity with the zone district requirements applicable to the subject property. Changes in plans or specifications shall not be made without written approval of the appropriate city officials. Failure to comply with the above shall constitute a violation of the provisions of the City of O’Fallon Zoning Ordinance.

Dated: \_\_\_\_\_, 20\_\_\_\_  
\_\_\_\_\_  
 Planning & Zoning Official, City of O’Fallon, Illinois

For office use only:     Flood Plain             Overlay Restrictions     Historic Landmark  
                                   8 ½ x 11 Site Plan         Storm Water Plan         Grading Plan             WSFU Plumb

**SAMPLE NOTICE OF INTENT**

**[Date letter is mailed or delivered]**

**[Applicant name]**

**[Applicant address]**

Dear **[Property Owner's Name Here]**,

Please be advised that I/we have submitted a petition for a variance to the City of O'Fallon Zoning Hearing Officer on **[date petition submitted]**. The variance is to allow **[describe the reason for the variance (i.e. increase the percent of lot coverage from 30% to XX% for construction of a room addition or to extend 5 feet into the required 25 ft rear yard setback for placement of a modular home)]**.

The variance is for the property address of **[subject property address]**, O'Fallon, Illinois.

The name and address of the property owner for this property is **[name and mailing address of the property for the variance]**.

This letter is being sent to you as required by ordinance to the property owners within 250 feet of the variance requested property.

If you have any questions regarding the variance, please contact either the property owner or the City of O'Fallon Planning & Zoning Office at (618)624-4500 ext. 4.

Sincerely,  
XXXXX

**[Applicant name and signature]**

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**FOR HAND-DELIVERED LETTERS:**

*If the letter is being hand-delivered to the property owner, please provide them with 2 letters. One they sign and date as received and return to you, the other they keep for their records. Put this on the hand-delivered letters:*

I/We hereby acknowledge receipt of the above notification of a Petition for Zoning Variance initiated by **[Applicant name here]**.

\_\_\_\_\_  
Property Owner's Signature, Their Property Address and Date

**[Date]**

This letter is to certify that I/we, **[applicant(s)]**, have complied with the requirements as outlined in the O'Fallon Zoning Code of Ordinances for the Variance for **[subject property address]**, O'Fallon, Illinois, which we filed for on **[filing date]**.

Signed,  
**[Applicant(s)]**

SAMPLE