

DEVELOPMENT SERVICES

435 RYMAN • MISSOULA, MT 59802 - 4297 • (406) 552-6630 • FAX:

MISSOULA CITY BOARD OF ADJUSTMENT APPLICATION

		Date:	
		Meeting Date:	
Applicant Na	me:		
Address:		Phone	
Agent Name:			
Address:		Phone:	
Project Addre	ess/Location:		
Request Type	:		
The followin	g items must be submit	ted as part of the application:	
Legal Descrip	otion		
Lot(s):	; Block(s):	;Subdivision:	
Section:	;Township:	; Range:	
COS#			
Zoning:			
11 PACKET a. Applic		FOLLOWING ITEMS:	

- **b.** Cover Letter
- c. Site Plan/ Landscaping Plan 11" x 14" or smaller (to scale)
- d. Elevation Drawings 11" x 14" or smaller (to scale)
- e. Topography Map, if applicable 11" x 14" or smaller (to scale)
- f. Floor Plan

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APPLICANT'S RESPONSIBILITY

The burden of proof for an applicable hardship and justification of proposal lies with the applicant. The applicant or the applicant's agent must be present at the meeting. Failure to appear at the meeting is grounds for denial of the variance request.

CHAPTER 20.90.010, BOARD OF ADJUSTMENT, AUTHORITY

A board of adjustment is established as authorized by \$76-2-321 through \$76-2-328, MCA. The board of adjustment is responsible for conducting public hearings and making decisions in accordance with the procedures of this zoning ordinance and state law.

BOARD OF ADJUSTMENT HAS THE AUTHORITY TO REVIEW:

- 1. Variance Requests (Section 20.85.090)
- 2. Appeals of Administrative Decisions (Section 20.85.100)
- 3. Special Exceptions (Section 20.75.090) and Sign Variances (Section 20.75.130)

VARIANCE APPROVAL

An approved zoning variance will lapse and have no further effect **2 years** after it is granted by the board of adjustment or 2 years after a final court order is issued (if the variance is the subject of litigation), unless **all** of the following occur:

- a) a building permit has been issued (if required);
- b) a zoning compliance permit has been issued; and
- c) a final certificate of zoning compliance has been issued.

I hereby attest that the information on this appl	ication form is accurate a	nd complete.
Property Owner's Signature	Date	
I,, owner of the said property my agent in this application.	authorize	to act as