



# CITY OF BELLEVIEW

City with Small Town Charm  
[www.belleviewfl.org](http://www.belleviewfl.org)

## Development Services

5525 SE 119<sup>th</sup> St.  
Belleview, FL 34420  
Office: 352-245-7021  
dsstaff@belleviewfl.org

### VARIANCE APPLICATION

**Variance Type:**  Area or Size of Structure  Set-backs  Height  Other

#### Property Owner Information:

Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

#### Project Location Information:

Parcel number(s): \_\_\_\_\_

Site Address(es) (if applicable): \_\_\_\_\_

Sec: \_\_\_\_\_ Twp: \_\_\_\_\_ Rge: \_\_\_\_\_ Size of lot: \_\_\_\_\_ Setbacks: Front: \_\_\_\_\_ Rear: \_\_\_\_\_

Side: \_\_\_\_\_ Subdivision: \_\_\_\_\_ Lots: \_\_\_\_\_

Block(s): \_\_\_\_\_ Unit(s): \_\_\_\_\_

Existing Land Use: \_\_\_\_\_ Existing Zoning: \_\_\_\_\_

Legal description of the property for which the variance is being requested:

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#### Petitioner Information:

Petitioner: \_\_\_\_\_ Email: \_\_\_\_\_

Petitioner's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### CHECKLIST

- Deed or other proof of ownership
- Description of the request including hardship to be eliminated (attach drawings if needed)
- Land Development Code reference for which variance is being requested

### NOTICE

**OWNER'S AFFIDAVIT:** This application is submitted in compliance with the definition of a variance as well as Article 9, Section 15-76.C. of the Zoning code of the Land Development Regulations, of which I have received a copy. I understand that a variance is authorized for the height, area or size of a structure or size of yards or open spaces and not for use. I also understand that no conforming use of neighboring lands, structures or buildings in the same zoning district shall be considered grounds for the authorization of a variance. Further, no permitted use of lands, structures or buildings in other zoning districts shall be considered grounds for the authorization of a variance.

I certify that this request is a result of conditions peculiar to the property and not the result of any actions on my part. I certify that the information on this application is accurate and complete. I understand that any incomplete or inaccurate information may cause delays and/or additional fees. I also understand that there are no fee refunds.

I \_\_\_\_\_ (applicant name) understand that the City of Bellevue has regulations regarding Zoning and development activities including: setbacks, lot coverage, and site plans and that I have attended a Site Plan Committee meeting (for commercial projects) or I have read and understand all regulations pertaining to my proposed project and the attached application and submittal package is complete.

Owner's Signature:

Date: \_\_\_\_\_  
State of \_\_\_\_\_  
County of \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_  
By \_\_\_\_\_  
Personally known to me \_\_\_\_\_ or has produced  
\_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public Signature

Print, type, or stamp commissioned name of Notary Public

Seal