



ZONE VARIANCE APPLICATION

APPLICATION NO: _____

DATE: _____

AS PROVIDED BY CHAPTER 20.66
MERCED CITY ZONING ORDINANCE
MERCED MUNICIPAL CODE
CITY OF MERCED

TO THE BOARD OF ZONING ADJUSTMENT, CITY OF MERCED, CALIFORNIA:

The undersigned applicant is/are the owner(s) of the following legally described property (give exact legal description, including Lot, Block, Track, etc.):

The property is situated (give street address or exterior boundaries of area requested for change, by streets, alleys, property lines, etc.)

A map or plot plan of this property with plans for all proposed buildings is hereto attached and made a part of this petition. (It is desirable to attach photographs of the property involved.)

The undersigned applicant has the ability and intention to proceed with the actual construction in accordance with these plans within one (1) year from date of approval and the applicant understands that this variance, if granted, becomes null and void and of no effect if the applicant does not proceed with the actual construction work in accordance with these plans within one (1) year* from the date of approval of this application, unless an extension therefore has been granted by the Board of Zoning Adjustment, upon the written petition of applicant for such extension before the expiration of the above period.

* or as otherwise specified by the Board of Zoning Adjustment (BZA)

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The answers to the following must be made complete and full (please attach additional sheets if necessary).

1. What are the special circumstances applicable to the property involved or to the intended use of this property that do not apply generally to other property in the same zone or vicinity?

2. Would the proposed uses be materially detrimental to the public welfare or injurious to persons or property in the vicinity?

3. What are the reasons that the property involved is unique and that such Variance is necessary for the preservation and enjoyment of a substantial property right?

4. What were the original deed restrictions, if any, affecting the use of the property involved? Give expiration date of these restrictions.

5. When was the above-described property acquired by the applicant?

6. What are the provisions of the Merced City Zoning Ordinance from which such property is sought to be excepted?

We, the undersigned property owner(s) request(s) a Variance to the Merced City Zoning Ordinance to use the above described property for the following purposes:

Signature

Address

Lot – Block – Tract

Date of Purchase

Signature

Address

Lot – Block – Tract

Date of Purchase

AFFIDAVIT

STATE OF CALIFORNIA)
COUNTY OF MERCED) ss.
CITY OF MERCED)

I, _____, being duly sworn depose and say that I am an owner of property involved in this application and that the foregoing signatures, statements, and answers herein contained and the information herewith submitted are in all respects true and correct to the best of my knowledge and belief.

Signed: _____

Mailing Address: _____

Phone No: _____

GENERAL ADKNOWLEDGEMENT

State of California
County of _____
On _____ before me, _____ (here insert name and title
of the officer), personally appeared _____
_____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.
Signature _____
(Seal)

This is to certify that the foregoing application has been inspected and found to be complete and acceptable for filing with the Merced Board of Zoning Adjustment.

Date Filed _____ Fee _____ Receipt No. _____ File No. _____

By: _____
For the Board of Zoning Adjustment

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Date Application Presented to Board of Zoning Adjustment _____

Public Notice Published: _____

Public Hearings Notice Mailed: _____

Board of Zoning Adjustment Action: _____ Date: _____

Board of Zoning Adjustment Resolution No. _____

Remarks:

VARIANCE REQUEST ADMINISTRATIVE PROCESS

