



City of Northport

Administrative Appeal Application Packet

All applications, plans, and supporting documents may be submitted by email to planning@cityofnorthport.org.

PROCESS

1. You have requested a variance, special exception or interpretation of the Zoning Ordinance. The Zoning Board of Adjustment has the full authority to rule on cases such as this after a public hearing.
2. The Zoning Board of Adjustment meets in City Hall, located at 3500 McFarland Boulevard, in the Council Chamber at 6:00 p.m. on the third Thursday of each month.
3. You or your agent must be present at the meeting to explain your request and answer questions.
4. No later than the closing of business hours four weeks prior to the meeting, the following must be submitted to the Planning and Inspections Department:
 - An Administrative Appeal Application completely filled out and signed (page 2 and 3 of this packet);
 - The names and mailing addresses of all adjoining property owners as obtained from the Tax Assessor on the first floor of the County Courthouse. Adjoining owners include owners on all sides of the property in question and also the property across streets, creeks, power line right-of-ways, etc.;
 - A filing fee of \$75.00, plus certified mailing fees per adjoining property owner and advertising fees;
 - A small drawing (8x11) of the lot in question with dimensions; existing and proposed new construction with dimensions; distance to the property lines of all structures; any other concerns which may be applicable to your case, such as existing and proposed parking spaces, heights of structures, access roads, etc. The drawing are not required to be professionally prepared, but must be legible and accurate.
5. A decision of the Zoning Board of Adjustment is final. The Circuit Court will hear any appeals to the decision of the Zoning Board of Adjustments. Appeals to the Circuit Court must be applied for within 15 days after a final decision of the Zoning Board of Adjustment has been made.



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Date of Application: _____

SUBMITTAL CHECKLIST

- Completed Application
- Designation of Agent Form (if applicant is not property owner)
- \$75 Appeal Fee (additional fees may apply)
- Names and Addresses of all Adjoining Properties
- Site Plan/Sketch (showing property lines, existing and proposed structures, and dimensions)

PROPERTY INFORMATION

Property Address: _____

Property Subdivision and Lot Number: _____

Property Zoning District: _____

Existing Buildings on Property: _____

Proposed Construction on Property: _____

PETITIONER INFORMATION

Petitioner Name: _____

Petitioner Phone: _____ Petitioner Email: _____

Petitioner Address (if different than property information above): _____

Petitioner is Owner of Property (if yes, skip owner information): Yes No

OWNER INFORMATION

Owner Name and/or Company: _____

Owner Mailing Address: _____

Owner Phone: _____ Owner Email: _____

BY CHECKING THIS BOX, I HEREBY AGREE TO THE FOLLOWING TERMS AND CONDITIONS:

The information contained in this document is true and correct and may be relied upon by the City of Northport. By typing my name and by checking this box, this acknowledges that I am bound by this document just as if I had signed the document rather than typed my name to this document.

Applicant Signature: _____ Date: _____



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REQUEST INFORMATION

Describe the nature of the request:

Describe the special conditions pertaining to your property (or to your case) which sets your case apart from others in the same zoning district:

Describe how your appeal (if granted) would impact neighboring properties or how it would or would not be contrary to the public interest:

Any additional information you would like to add to help process your request, including evidence of petitioner's interest in the property if petitioner is not the property owner:



City of Northport Designation of Agent Form

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I, _____, being owner of the property which is the subject of this application hereby authorize _____, to act as my representative with the City of Northport's (Board of Zoning, and/or Planning Commission, and/or City Council), as required by the type of request listed on the attached application form.

Property Owner Signature: _____

Date: _____

Property Owner Mailing Address:

Phone Number:

Authorized Agent Mailing Address:

Phone Number:

City of Northport

3500 McFarland Blvd

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