



CITY OF CASHMERE
101 WOODRING STREET
CASHMERE, WASHINGTON 98815
PHONE (509) 782-3513 FAX (509) 782-2840

FEE: \$1200.00

Application Date _____
Receipt No. _____
Hearing Date _____

Application for Variance

NAME OF APPLICANT _____

ADDRESS _____ PHONE _____

PROPERTY OWNER _____

PROPERTY ADDRESS _____

PROPERTY ZONING _____

PARCEL NUMBER _____

PROPERTY LEGAL DESCRIPTION (MAY BE ATTACHED) _____

DESCRIBE VARIANCE REQUESTED _____

ATTACH A SCALED DRAWING OF THE PROPERTY SHOWING BUILDING COVERAGE, SQUARE FOOTAGE, AND PLACEMENT INCLUDING ANY PROPOSED BUILDING.

PLEASE ADDRESS THE FOLLOWING QUESTIONS: *Cashmere Municipal Code 17.68.010* states that no variance shall be granted unless it can be shown that all the following conditions exist:

Describe the difficulty causing the need for your variance. _____

Is this variance request the result of an illegal act on the part of the applicant? **Please explain in detail** _____

Is your situation due to unusual conditions such as topography, lot size or shape, all of which are not the general condition of the surrounding area? **Please explain in detail** _____

The hardship asserted as grounds for a variance must arise out of the zoning ordinance. **Please explain hardship and reference section of zoning ordinance.** _____

Do the grounds for the variance requested apply directly to your premises and not to other properties or personal conditions? **Please explain in detail.** _____

Would the variance constitute a grant of special privilege inconsistent with other properties in the vicinity? **Please explain in detail.** _____

Is your variance request necessary because of special circumstances to provide it with use rights and privileges permitted to other properties in the vicinity and district in which it is located? **Please explain in detail.** _____

Will granting of the variance be detrimental to the public welfare or injurious to property or improvements in the vicinity or district in which it is located? **Please explain in detail** _____

I HAVE ANSWERED ALL QUESTIONS TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT IF NOT ANSWERED TRUTHFULLY MY PERMIT, IF GRANTED, MAY BE REVOKED. I UNDERSTAND THE FEE IS NON-REFUNDABLE.

SIGNATURE OF APPLICANT

DATE

APPLICANT PHONE #

EMAIL Address

APPLICATION FEES ARE NON-REFUNDABLE. THERE ARE NO GUARANTEES THAT YOUR VARIANCE WILL BE APPROVED.

Upon receiving an application, a file will be created and within 28 days after receipt of the application the applicant will be provided a written determination of completeness. After issuing the determination of completeness the department will issue a notice of application and appropriate application materials will be routed to the necessary reviewing agencies or departments. Each agency/department will review your application and provide the planning department with a list of comments and/or items that you must provide to obtain their approval of the variance. A notice of application will be posted at the site, published and sent to surrounding property owners within 350 feet of the action. There is a 14-day comment period for the notice of application.

An open record hearing date is set before the City of Cashmere Hearing Examiner and the applicant notified of the date time and place of the hearing. Testimony both for and against the proposal will be taken and the applicant will be able to provide rebuttal to all testimony presented. The Hearing Examiner then has ten days to approve, approve with conditions, or deny the application.