



CITY OF FAIRVIEW HEIGHTS

10025 Bunkum Road ♦ Fairview Heights, Illinois 62208 ♦ Phone: (618) 489-2000 ♦ www.cofh.org

Dear Applicant:

Sign variance applications will be reviewed by the Zoning Board of Appeals on the fourth Tuesday of each month. The Zoning Board of Appeals shall act in accordance with the procedures specified by Section 14-10-13 of the Development Code. A recommendation will then be forwarded to the Community Committee and City Council for their review and final decision. Legislation to approve a sign variance is in the form of an ordinance, which requires two readings (meetings) by City Council. Representation is required at meetings in which your case will be discussed.

No area-bulk variance, such as a sign variance, shall be recommended by the Zoning Board of Appeals unless it finds:

(a) That special circumstances or conditions fully described in findings of fact apply to the land or buildings for which the area-bulk variance is sought, which circumstances or conditions are peculiar to such land or buildings and do not apply generally to the land or buildings in the neighborhood, and that said circumstances or conditions are such that strict application of the provisions of this Code would deprive the applicant of a reasonable use of such land or building;

(b) that, for reasons fully set forth in the findings, the recommending of the area-bulk variance is necessary for the reasonable use of land or buildings, and that the variance as recommended by the Board is the minimum variance that will accomplish this purpose;

(c) that the recommending of this variance will be in harmony with the general purpose and intent of this Code and will not be injurious to the neighborhood or otherwise detrimental to the public welfare. In addition to considering the character and use of adjoining buildings and those in the vicinity, the Board, in making its recommendations shall take into account whether the conditions of the subject premises are peculiar to the lot or tract described in the petition. Should it be determined that the conditions are part of the general condition of the neighborhood, then it shall be so noted and the Board may recommend appropriate corrections to Code.

As an applicant, **you are responsible for submitting:**

1. Completed application form- must be received at least thirty (30) days prior to the Zoning Board of Appeals meeting
2. Site plan- drawn to scale and includes the following information:
 - a) Location and dimensions of lot, structures, and driveways
 - b) Dimensions and renderings of all existing and proposed signage
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3. Narrative- statement describing the proposed development and any pertinent details
4. Photographs- aerial and/or ground-level photographs of the site
5. Buffered Parcel Report- listing of all property owners within 150 feet of the subject property. This information can be obtained through St. Clair County Mapping and Platting at 618-825-2527. Be sure to request that the list includes: name of owner, complete mailing address, *and parcel number*.
6. If supporting documents are larger than 8 ½ x 11 inches, fourteen (14) full sized copies of all paperwork and thirteen (13) 11 x 17 copies of all the paperwork plus one digital copy are required. If all paperwork is 8 ½ x 11 inches, you must submit twenty seven copies of all paperwork plus one digital copy.
7. \$150 application fee- cash or check only

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Attached please find a copy of the application form. Contact the Land Use and Development Department at 618-489-2060 with any questions.

APPLICATION FOR SIGN VARIANCE



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(Do not write in this space – for office use only)

Case Number Assigned:

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Zoning District of Property:

Date Set for Hearing:

Recommendation of ZBA:

Name of Newspaper and Publication Date:

Date of City Council 2nd reading:

Publication Fee Paid:

Action by City Council:

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1. Name of property owner(s): _____

Mailing address: _____

Phone: _____

E-Mail: _____

2. Name of applicant (if other than owner): _____

Relationship to owner (contractor, family member, lessee, etc.): _____

Mailing address: _____

Phone: _____

E-Mail: _____

3. Address of property: _____
Parcel (Tax) ID number: _____
Present use of property: _____
Zoning district: _____

4. Variance requested (be specific): _____

5. Hardship: What unique physical characteristics of the subject property are cause for allowing reasonable relief from Development Code sign regulations?

- | | | |
|--------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Too narrow | <input type="checkbox"/> Topography | <input type="checkbox"/> Soil |
| <input type="checkbox"/> Too small | <input type="checkbox"/> Drainage | <input type="checkbox"/> Sub-surface |
| <input type="checkbox"/> Too shallow | <input type="checkbox"/> Shape | <input type="checkbox"/> Other: _____ |

Please describe:

6. Are the conditions of hardship for which you request a variance peculiar only to the property described by this petition? Yes No

If "no", how many other properties are similarly affected? _____

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If "yes", please describe: _____

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9. A sign variance is requested for the property described above in conformity with the documents submitted herewith.

I certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and accurate.

I consent that the entry in or upon the premises described in this application by any authorized official of Fairview Heights, Illinois for the purpose of inspecting or of posting, maintaining, and removing such notices as may be required by law.

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APPLICATION FOR SIGN VARIANCE



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Please describe:

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|--------------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Too narrow | <input type="checkbox"/> Topography | <input type="checkbox"/> Soil |
| <input type="checkbox"/> Too small | <input type="checkbox"/> Drainage | <input type="checkbox"/> Sub-surface |
| <input type="checkbox"/> Too shallow | <input type="checkbox"/> Shape | <input type="checkbox"/> Other: _____ |

Please describe:

6. Are the conditions of hardship for which you request a variance peculiar only to the property described by this petition? Yes No

If "no", how many other properties are similarly affected? _____

7. Was the hardship created by the action of anyone having property interest in the land after the Development Code was adopted? Yes No

If "yes", please describe: _____

8. Was the hardship created by any other man-made change; such as the relocation of a road? () Yes () No

If "yes", please describe: _____

9. A sign variance is requested for the property described above in conformity with the documents submitted herewith.

I certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and accurate.

I consent that the entry in or upon the premises described in this application by any authorized official of Fairview Heights, Illinois for the purpose of inspecting or of posting, maintaining, and removing such notices as may be required by law.

Signature of Owner: _____ Date: _____

Signature of Applicant: _____ Date: _____