



West Feliciana Parish  
 Planning & Zoning Ordinance  
 P.O. Box 1921, 5934 Commerce Street  
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 Web Site [www.westfelicianaparish-la.gov](http://www.westfelicianaparish-la.gov)

## APPLICATION FOR A ZONING VARIANCE

(Pre-Application Conference Optional)

### ADMINISTRATIVE SUMMARY (Staff Use Only)

Application #		Date Submitted		Fee Required		Fee Paid	
Associated Applications if Any				Assigned Case Manager			

### APPLICANT/CONTACT INFORMATION

APPLICANT INFORMATION		CONTACT INFORMATION (Same as Applicant? <input type="checkbox"/> )	
Applicant Name		Contact Name	
Address		Address	
City, State, Zip		City, State, Zip	
Telephone		Telephone	
Fax		Fax	
Email		Email	

### OWNERSHIP INFORMATION

PROPERTY OWNER 1 INFORMATION (Same as Applicant? <input type="checkbox"/> )		PROPERTY OWNER 2 INFORMATION (if Needed)	
Owner's Name		Owner's Name	
Address		Address	
City, State, Zip		City, State, Zip	
Telephone		Telephone	
Fax		Fax	
Email		Email	

### VARIANCE SUMMARY

Subject Property Location [Please Include Address and Assessor's Identification Number(s)]		
Parcel 1	Parcel 2	Parcel 3
Legal Description of Subject Property		
Designated Future Land Use Category	Current Use of Property	Proposed Use of Property
Current Regional Growth Sector	Current Context Area	Current Zone District
Ordinance Provision(s) from which a variance is requested		

**TYPE OF VARIANCE REQUESTED**

Project		Required	Proposed
<input type="checkbox"/>	Area		
<input type="checkbox"/>	Common open space		
<input type="checkbox"/>	Gross residential density		
<b>Lot</b>			
<input type="checkbox"/>	Area		
<input type="checkbox"/>	Building coverage		
<input type="checkbox"/>	Width		
<input type="checkbox"/>	Row House lot width (end lot)		
<input type="checkbox"/>	Row House lot width (interior lot)		
<b>Structure Setbacks (Principal)</b>			
<input type="checkbox"/>	Front		
<input type="checkbox"/>	Side, street		
<input type="checkbox"/>	Side, interior		
<input type="checkbox"/>	Rear		
<b>Structure Setbacks (Accessory)</b>			
<input type="checkbox"/>	Behind front façade		
<input type="checkbox"/>	Side, street		
<input type="checkbox"/>	Side, interior		
<input type="checkbox"/>	Rear		
<b>Build-to Area</b>			
<input type="checkbox"/>	Primary street build-to area (min/max)		
<input type="checkbox"/>	Building facade in primary street build-to area (min % of lot width)		
<input type="checkbox"/>	Side street build-to area (min/max)		
<input type="checkbox"/>	Building facade in side street build-to area (min % of lot depth)		
<b>Parking Setback</b>			
<input type="checkbox"/>	Primary street setback		
<input type="checkbox"/>	Side street setback		
<input type="checkbox"/>	Setback abutting an RS- district		
<input type="checkbox"/>	Setback abutting any other district		
<b>Principal Structure Height</b>			
<input type="checkbox"/>	Stories		
<input type="checkbox"/>	Feet		
<input type="checkbox"/>	Ground story elevation		
<input type="checkbox"/>	Ground story floor height		
<b>Bulk Plane</b>			
<input type="checkbox"/>	Bulk plane abutting an RS- district		
<b>Accessory Structure Height</b>			
<input type="checkbox"/>	Stories		
<input type="checkbox"/>	Feet		
<b>Transparency</b>			
<input type="checkbox"/>	Ground Story		
<input type="checkbox"/>	Upper Story		

<input type="checkbox"/>	Blank Wall Area		
<b>Building Entrance</b>			
<input type="checkbox"/>	Street facing entrance required		
<b>Building Mass</b>			
<input type="checkbox"/>	Building length		
<b>Building Elements Allowed</b>			
<input type="checkbox"/>	Building Element		
<b>Parking</b>			
<input type="checkbox"/>	Parking ratio		
<input type="checkbox"/>	Parking area design		
<input type="checkbox"/>	Bicycle parking		
<input type="checkbox"/>	Site Access		
<input type="checkbox"/>	Stacking and queuing		
<input type="checkbox"/>	Off street loading		
<b>Landscaping</b>			
<input type="checkbox"/>	Width of landscaping area		
<input type="checkbox"/>	Number of canopy trees		
<input type="checkbox"/>	Number of understory trees		
<input type="checkbox"/>	Number of shrubs		
<input type="checkbox"/>	Wall or fence		
<b>Outdoor Lighting</b>			
<input type="checkbox"/>	Light source		
<input type="checkbox"/>	Fixture height		
<input type="checkbox"/>	Other		
<b>Outdoor Storage</b>			
<input type="checkbox"/>	Limited outdoor storage		
<input type="checkbox"/>	General outdoor storage		
<b>Signs</b>			
<input type="checkbox"/>	Sign height		
<input type="checkbox"/>	Sign area		
<input type="checkbox"/>	Sign setback		
<input type="checkbox"/>	Sign illumination		
<b>Other Variance</b>			
<input type="checkbox"/>			
List the exceptional and extraordinary circumstances that are peculiar to the land or structure involved which are not applicable to other land or structures in the same zoning district.		List any and all practical difficulties or unnecessary hardships that will result from the exceptional and extraordinary circumstances.	
The applicant must prove that the exceptional and extraordinary circumstances do not result from the actions of the applicant. How were the exceptional and extraordinary circumstances created?		List any and all alternatives considered by the applicant and provide evidence as to why they are not feasible.	

<b>Would approval of this variance allow the applicant to do something that other property owners in the same situation would not be able to do? If so how?</b>	<b>Would denial of this variance deprive the applicant of rights commonly enjoyed by other property owners in the similar situations? If so how?</b>

**Current Zoning Surrounding Subject Property**

<b>North:</b>		<b>South:</b>	
<b>East:</b>		<b>West:</b>	

**Current Land Use Surrounding Subject Property**

<b>North:</b>		<b>South:</b>	
<b>East:</b>		<b>West:</b>	

**EXHIBITS**

<b>Owner Information Sheet</b>	<input type="checkbox"/>	<b>Additional Exhibits If Any:</b>
<b>Maps (vicinity, zoning, floodplains, wetlands others as requested by staff)</b>	<input type="checkbox"/>	
<b>Site Plan (designating primary, side, and service street frontages)</b>	<input type="checkbox"/>	

**CERTIFICATION AND SIGNATURE**

By my signature below, I certify that the information contained in this application is true and correct to the best of my knowledge at the time of the application. I acknowledge that I understand and have complied with all of the submittal requirements and procedures and that this application is a complete application submittal. I further understand that an incomplete application submittal may cause my application to be deferred to the next posted deadline date.

Signature of Applicant	Date	Signature of Property Owner's (If not the Applicant)	Date

## APPLICANT & OWNER INFORMATION SHEET

Any applicant for a zoning variance must provide the applicant's name, address, and respective ownership interest, if any, on the application. In addition, the applicant must provide, in the space provided on this form, a list of all the owners of the property and the holders of any deeds of trust, identifying which owners and holders of deeds of trust are represented by the applicant.

Application Number	Applicant's Name

Property Address(es)

Applicant's Address

**NOTE: If the applicant is not the property owner, this form must be accompanied by a Power of Attorney statement from the property owner.**

Indicate as accurately as possible the form of interest in the property, and the amount held by the individual or entity listed as "applicant" above.

Fee Title Owner (Has Deed of Ownership)	All	<input type="checkbox"/>
	A Portion	<input type="checkbox"/>
Contract Owner	All	<input type="checkbox"/>
	A Portion	<input type="checkbox"/>
Holder of a Security Interest	All	<input type="checkbox"/>
	A Portion	<input type="checkbox"/>

List the names and addresses of all owners and holders of Deeds of Trust for the property, if any, and indicate which owners or holders of deeds of trust are represented by the applicant in the space below (please add additional pages, if needed).

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Signature of Applicant	Date Signed