

APPLICATION FOR VARIANCE

THIS SECTION FOR OFFICE USE

Application No.	VA 11048	Date	10.7.2013
Application Fee	\$ 250.00	Receipt No.	#132258

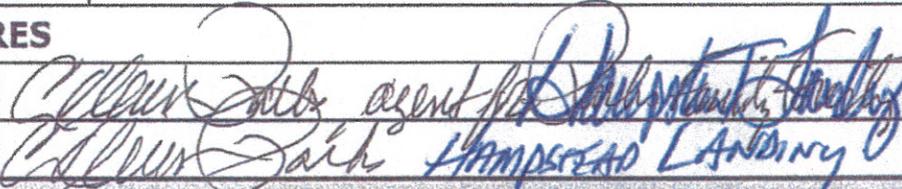
SECTION 1: APPLICANT INFORMATION

Applicant's Name	COLEMAN PARKS	Owner's Name:	COLEMAN PARKS HAMPSHIRE LANDING
Applicant's Address	214 BARNACLE CIRCLE	Owner's Address:	214 BARNACLE Cir
City, State, & Zip	LEXINGTON SC 29072	City, State, & Zip	LEXINGTON SC 290
Phone Number:	803 960 8991	Phone Number:	803 960 8991
Relationship of applicant to land owner:	OWNER, MGR, PHASE 2, UNDER CONTRACT		

SECTION 2: PROJECT INFORMATION

Property Identification Number (PIN):	3282-71-0479-0000	Total property acreage:	1 AC - 2 LOTS
Classification:	RP	Variance Size:	
Project Location & Address			
Project Variance and type requested:			

SECTION 3: SIGNATURES

Applicant's Signature		Date:	10-4-
Agent's Signature	COLEMAN PARKS HAMPSHIRE LANDING	Date:	10-4-

NOTICE TO APPLICANT:

The Board of Adjustment shall review applications for a variance and shall be the approving authority for all requirements. All applicants seeking a variance shall schedule a pre-application conference with the administrator to discuss the procedures, standards, and regulations required for variance approval.

An application for a variance shall be submitted in accordance with application requirements. Once the application has been determined complete, the Administrator shall schedule a public hearing and give notice to adjoining/abutting owners and aggrieved parties in the form of applicant supplied #10 envelopes with paid first class postage.

The applicant seeking the variance shall have the burden of presenting evidence sufficient to allow the Board of Adjustment to reach the conclusion set forth below (Findings), as well as the burden of persuasion on those issues.

Applicant must also submit the information described in the Variance Checklist provided below.

Applicant or agent authorized in writing must attend the public hearing.

Once the public hearing has been advertised, the case will be heard unless the applicant withdraws the application or unless the Board of Adjustment agrees to table or delay the hearing.

OFFICE USE ONLY

<input checked="" type="checkbox"/> VA Fees \$250		Total Fee Calculation \$ 250	
Payment Method:	Cash: <input type="checkbox"/> \$ _____	Credit Card:	Check: <input checked="" type="checkbox"/> Check # 1125
		<input type="checkbox"/> Master Card	
		<input type="checkbox"/> Visa	
Application received by:	Ashley Frank	Date:	10.7.13
Application completeness approved by:		Date:	
Scheduled for public hearing: NOV. 20 - 2013			