

**CITY OF HOOVER
BOARD OF ZONING ADJUSTMENT
SPECIAL EXCEPTION APPLICATION**

Case No. _____
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The applicant shall submit a complete application; including supplemental information and a non-refundable application fee of \$ 75 to the Secretary of the Board, at least 15 days prior to the meeting at which the Board is to hear the Special Exception request.

If the applicant is not the owner of the subject property. The owner shall stipulate in a letter to the Board, that the applicant is so authorized.

OWNER/APPLICANT INFORMATION

Name of Property Owner: _____

Address: _____

Telephone Numbers Work: _____ Home: _____

Name of Applicant: _____

Address: _____

Telephone Numbers: Work: _____ Home: _____

SUBJECT PROPERTY INFORMATION

Address: _____

Lot: _____ Block: _____ Subdivision Name: _____

Zoning District: _____

TIME LIMIT ON OBTAINING PERMIT

Unless otherwise specified by the Board, a special exception, or variance, authorized by the Board shall expire if the applicant fails to obtain a building permit pursuant thereto within six (6) months of the date of authorization by the Board.

EXPLANATION OF SPECIAL EXCEPTION REQUEST

EACH SPECIAL EXCEPTION APPLICATION SHALL BE ACCOMPANIED BY :

1. A non-refundable application fee of \$ 75.00
2. A vicinity map showing the exact location of the site in relation to the surrounding area and zoning of the site and adjacent property.
3. A legal description of the property
4. 15 copies of a site plan, drawn to a scale not larger than one inch equals 50 feet, folded to a dimension of eight and one-half by eleven inches, showing:
 - a. Existing and proposed topography
 - b. Property lines
 - c. Scale
 - d. Existing and proposed structures and their uses
 - e. Dimensions and height of existing and proposed structures
 - f. Exterior lighting
 - g. Outside storage areas
 - h. Parking and loading areas
 - i. Points of ingress and egress
 - j. Signs
5. Tree Conservation Plan
6. Any supplemental information which will assist the staff and Board in reviewing the Special Exception request.

Date

Signature of Owner / Applicant

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APPLICATION WITHDRAWN	
_____	_____
Date	Signature of Owner / Applicant

OFFICIAL USE ONLY

Date Filed:	Date of Notice:	Date of Hearing:
Fee Paid:	Receipt No. :	Date Paid:
Decision of Board of Zoning Adjustment		
Approved:_____ Denied:_____		
List Conditions of Approval or Reasons for Denial:		