



CITY OF MARION  
PLANNING DEPARTMENT  
301 S. Branson Street, Marion, IN 46952  
765/651-4296 • Fax: 765/651-4298

**SPECIAL EXCEPTION APPLICATION**

(As stipulated in IC 36-7-4-918.2)

Docket Number: \_\_\_\_\_

Public Hearing Date/Time\* \_\_\_\_\_

**\*Attendance Required**

**1. APPLICANT/REPRESENTATIVE INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**2. OWNER OF PROPERTY WHERE VARIANCE IS BEING REQUESTED**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

\_\_\_\_\_

**3. PROPERTY INFORMATION**

Location: \_\_\_\_\_

**Street Address**

\_\_\_\_\_

**Lot #**

**Subdivision**

Land Use: \_\_\_\_\_

Zoning: \_\_\_\_\_

●●● *Legal Description Must Be Attached* ●●●

**4. FULL STATEMENT OF SPECIAL EXCEPTION REQUEST:**

**5. CERTIFICATION**

I hereby certify that I have the authority to make the above application, that the information, to my knowledge and belief, is true and correct.

Signature of Property Owner \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

The information contained herein has been duly subscribed and sworn to me this \_\_\_\_\_ day of

\_\_\_\_\_ 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed Name

My Commission Expires: \_\_\_\_\_

IN ORDER TO RECEIVE A SPECIAL EXCEPTION PERMIT, THE REQUEST MUST AFFIRMATIVELY COMPLY WITH THE FOLLOWING:

- [1] The proposed Special Exception (IS) (IS NOT) located in the district wherein such uses may be permitted by exception;
- [2] The definition set forth in the zoning district for the proposed Special Exception (HAS BEEN) (HAS NOT BEEN) met; and
- [3] The Special Exception (IS) (IS NOT) consistent with the spirit, purpose, and intent of these regulations will not substantially and permanently injure the appropriate use of neighboring property and will serve the public convenience and welfare, as certified by the City Plan Commission.
  - The establishment, maintenance, or operation of the special exception WILL NOT be detrimental to or endanger the public health, safety, morals, or general welfare.
  - The special exception WILL NOT be injurious to the use and enjoyment of other property in the immediate vicinity for the purposes already permitted, nor substantially diminishes and impairs property values within the neighborhood.
  - The establishment of the special exception WILL NOT impede the normal and orderly development and improvement of surrounding property for uses permitted in the district.
  - Adequate utilities, streets, drainage, and other necessary facilities have been or are being provided.
  - Adequate measures have been or will be taken to provide ingress and egress designed to minimize traffic congestion OR no additional traffic is anticipated.

[4] Additional conditions may be imposed by the Board of Zoning Appeals to insure the public health, safety, and welfare is protected. The following conditions will apply:

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DECISION OF THE BOARD

IT IS THEREFORE the decision of the Marion Board of Zoning Appeals that the Special Exception request and application for Docket # \_\_\_\_\_, as filed by \_\_\_\_\_, is hereby \_\_\_\_\_, subject to any conditions and/or stipulations hereinafter stated in the official meeting minutes of this board meeting, which are incorporated herein by reference and made part hereof.

ADOPTED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Board Chairman

\_\_\_\_\_  
Board Vice- Chairman

\_\_\_\_\_  
Board Secretary

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member



**SPECIAL EXCEPTION PROCEDURE:**

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**IMPORTANT DATES:**

-Application Filing Date- \_\_\_\_\_

-BZA Public Hearing- \_\_\_\_\_ (Generally the 2<sup>nd</sup> Tuesday of the month)

DATE: \_\_\_\_\_ 1) Original Special Exception Application (filed **14** days prior to next Board of Zoning Appeals meeting) including:  
 \$40.00 fee  
 Legal description  
 Proof of ownership/or owner's signature  
 Reason for Special Exception

DATE: \_\_\_\_\_ 2) Noticing of the public and affected property owners (**10** days prior to hearing):  
 Mail notices by certified mail  
 Post sign (return with photo and sign affidavit)  
 Will be printed in Chronicle Tribune (send to print 13 days prior to hearing)

DATE: \_\_\_\_\_ 3) Staff will introduce case and applicant at Board of Zoning Appeals

DATE: \_\_\_\_\_ 4) Applicant will present at hearing and answer questions of the Board and public

DATE: \_\_\_\_\_ 5) Board of Zoning Appeals may decide to do either of the following:  
 Approve  
 Approve with set conditions  
 Continue with need of more discussion or information  
 Deny

**SPECIAL EXCEPTION FINDINGS: (The following criteria will be used by the Board of Zoning Appeals and staff to evaluate your request. The Board may set further conditions/requirements with their approval of your request.)**

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- [3] The Special Exception (IS) (IS NOT) consistent with the spirit, purpose, and intent of these regulations will not substantially and permanently injure the appropriate use of neighboring property and will serve the public convenience and welfare, as certified by the City Plan Commission.
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