



Planning & Building Department
6280 W 800N
McCordsville, IN 46055
Phone: 317.335.3604
Email: building@mccordsville.org

PUBLIC HEARING INFORMATION

Case #: BZA-20-008

Title: Refugio Palacios' request for a Special Exception to allow the expansion of a legal, non-conforming use in the form of an accessory structure.

Meeting Date: this zoning petition is currently scheduled to be heard at the August 5th Board of Zoning Appeals meeting.

*Meeting agenda and staff report will be available on the website by end of business day on the Friday preceding the applicable meeting. Go to www.mcccordsville.org and click on "Agendas & Minutes".



**McCORDSVILLE BOARD OF ZONING APPEALS
VARIANCE APPLICATION**

Zoning Ordinance Section 10.03

Applicant Information

Name: Refugio Palacios

Current Address: 6084 W. 800 N.
(Number) (Street)

McCordsville IN 46055
(City) (State) (Zip)

Phone No.: 317 748-0686 E-mail Address: yorkshirelandscaping@gmail.com

Property Owner Information (the "owner" does not include tenants or contract buyers)

Name: Refugio Palacios

Current Address: 6084 W. 800 N.
(Number) (Street)

McCordsville IN 46055
(City) (State) (Zip)

Phone No.: 317-748-0686 E-mail Address: yorkshirelandscaping@gmail.com

Property Information

Current Address: 6084 W. 800 N. McCordsville IN
(Number) (Street)

Subdivision Name (if applicable): NO

OR General Location (if no address has been assigned, please provide a street corner, subdivision lot number, or attach a legal description)

Administrative Officer Use Only:
Existing Zoning: _____
Future Land Use: _____
Date Application Filed: _____
Docket No.: _____

Present Use of Property: Garage Storage for Personal Cars

Size of the Lot/Parcel in Question: 2 1/2 Acres

Are there any restrictions, laws, covenants, variances, special exceptions, or appeals filed in connection with this property that would relate or affect its use for the specific purpose of this application? If yes, please list date and docket number, decision rendered and pertinent explanation:

Variance Information

Describe the variance requested: _____

Development Standards Variance Requested:

- | | |
|--|--|
| <input type="checkbox"/> Building Height | <input type="checkbox"/> Entrance / Drive |
| <input type="checkbox"/> Building Setback | <input type="checkbox"/> Sight Visibility |
| <input type="checkbox"/> Lot Coverage | <input type="checkbox"/> Fence and Wall |
| <input type="checkbox"/> Lot Width | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Lot Area | <input type="checkbox"/> Buffering and Screening |
| <input type="checkbox"/> Parking | <input type="checkbox"/> Exterior Lighting |
| <input type="checkbox"/> Loading | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Other (please specify): _____ | |

Describe reasons supporting the variance requested: _____

Development Standards Variance Criteria

The McCordsville Zoning Ordinance establishes specific design criteria that must be met in order for a variance to be approved. Please answer each question below and if the response is "NO", please describe why the variance requested does not meet the required criteria.

Will the variance provide safe conditions that will not be injurious to the public health, safety, morals, and general welfare of the community?

YES NO, Please Explain (attach additional pages as necessary): _____

Will the use and value of the area adjacent to the property included in the variance not be affected in a substantially adverse manner?

YES NO, Please Explain (attach additional pages as necessary): _____

Will the strict application of the terms of this Ordinance result in a practical difficulty in the use of the property? This situation shall not be self-imposed, nor be based on a perceived reduction of, or restriction on, economic gain.

YES NO, Please Explain (attach additional pages as necessary): _____

Applicant's Signature

The information included in and with this application is completely true and correct to the best of my knowledge and belief.

Rehyni Palmer
(Applicant's Signature)

7-17-2020
(Date)

Owner's Signature (the "owner" does not include tenants or contract buyers)

I authorize the filing of this application and will allow the Town staff to enter this property for the purpose of analyzing this request. Further, I will allow a public notice sign to be placed and remain on the property until the processing of the request is complete.

Rehyni Palmer
(Owner's Signature)

7-17-2020
(Date)

Rehyni Palmer
(Owner's Signature)

7-17-2020
(Date)



**Town of McCordsville
Property Owner's Consent For Review Form**

Property Owner Information (the "owner" does not include tenants or contract buyers)

Name: Refugio PALACIOS

Current Address: 6084 W 800N
(Number) (Street)

M^C Cordsville TN 46055
(City) (State) (Zip)

Phone No.: 317 748-0686 E-mail Address: YORKSHIRELANDSCAPING@GMAIL.COM

The Property to be reviewed by: (Check all that apply)

Town Council

Plan Commission

Board of Zoning Appeals

Property Information

Current Address: 6084 W 800N
(Number) (Street)

And Location Description (if no address has been assigned, please provide a street corner, subdivision lot number, or attach a legal description)

Property Owners Consent: I/WE, Refugio Palacios, here-by acknowledge and give consent that my/our property can be submitted for review and consideration by the aforementioned Board(s).

Property Owner's Signature: Refugio Palacios Date: 7-17-2020

Property Owner's Signature: _____ Date: _____

