



**LINCOLN COUNTY GEORGIA
Planning & Zoning**

P.O. Box 340
107 Perryman Ave.
Lincolnton, GA 30817
PH# (706)359-5522 / FAX# (706) 359-5831

Variance Request:

The undersigned requests that a variance be granted from Lincoln County Ordinance stated below:

Reason(s) for Request: _____

Property Location: _____
This property has _____ feet of frontage on the _____ side of _____ and is approximately _____ feet from the intersection of _____. This property's total area is approximately _____ acres. The attached survey plat for the property was prepared by _____ and dated _____.

Applicant and Ownership Information:

Owner: _____ Ph# _____
Address: _____

Applicant: _____ Ph# _____
Address: _____

I hereby depose and say under penalties of perjury that all of the statements contained herein or submitted with this application are true.

Owner/Applicant

Please return original notarized application with all documents, along with your \$200 **non refundable** application fee to:

Lincoln County Planning and Zoning
P.O. Box 340
Lincolnton, GA 30817

No variance shall be recommended unless the Planning Commission finds that ALL of the following conditions exist:
(a) The special circumstances or conditions applying to the building or land in question are peculiar to the land involved and do not apply generally to other land or buildings in the vicinity.
(b) The strict application of the ordinance to this particular piece of property would create a unnecessary hardship by depriving the applicant of any reasonable use of his land. Mere loss in value shall not justify a Variance from Ordinance. There must be a deprivation of the beneficial use of land.
(c) The condition from which relief of a Variance is sought did not result from action by applicant.
(d) Relief, is granted, would not cause substantial detriment to the public good or impair the purposes and intent of Ordinance, provide, however, that no variance may be granted for a use of land or building or structure that is prohibited in a given district by Ordinance.

File # _____
Map/Parcel: _____
Public Hearing Date: _____
B.O.C. Date _____
CHECK# _____
Date Applied _____