



**Application for Variance/Appeal (BOZA)
Planning and Zoning Department**

Fee: **\$150.00**

Receipt #: _____

Address & Legal Description of Property:

OFFICE USE ONLY

Date of Application: _____

Proposed Zoning Meeting Date: _____

Received by: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email Address: _____

Applicant: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email Address: _____

Name of Agent (if applicable): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email Address: _____

Requested Variance/Appeal:

**APPLICATION FOR VARIANCE/APPEAL
BOARD OF ZONING ADJUSTMENT**

1. NATURE OF VARIANCE/APPEAL

In describing the exact nature and type of variance or appeal being requested, the applicant must clearly indicate the specific requirements for which they are requesting a variance and/or the administrative decision or interpretation that is being appealed. On the attached application, Requested Variance/Appeal should describe the particular provisions of the Iberia Parish Zoning Regulations or other laws that prevent the proposed project and Reasons and justifications for Variance/Appeal should describe how the literal interpretation of the provisions of the Iberia Parish Zoning Regulations would deprive the applicant of rights commonly enjoyed by other properties in the same district under the terms of the Code

AFFIDAVIT OF OWNERSHIP

Owner (s) hereby certifies that he is the owner of the subject property. Owner (s) declare that the information and documentation contained in this application for rezoning is true and correct to the best of his knowledge and that the development shall comply with all applicable Iberia Parish Codes, Regulations, and Ordinances. Owner (s) understands that filing of this application does not in any manner insure its successful adoption; owner (s) understands the filing of this application is at his risk. Owner (s) also authorized any/all employees of Iberia Parish Government to enter the property for inspection purposes.

When signed below by owner (s), any Agent designated below is authorized to speak for the owner(s) and to represent the owner (s) at Zoning Commission and Iberia Parish Council Meetings.

Owner (s): _____

Date: _____

Applicant/Authorized Agent:

Date: _____ **Applicant:** _____

MINIMAL GRAPHIC REQUIREMENT

A. *SUBMITTAL REQUIREMENT

- **Three (3) copies** of the site plan to **SCALE**, including lot size, easements and setbacks, adjacent streets and right-of-ways. Dimensions of proposed or existing buildings with location noted, if applicable proposed landscaping and parking shown on the site plan. The site plan shall be no larger than 8" x 11" or 11" x 17" (only). (More copies may be required after technical review.)
- For Home Occupancy please provide a floor plan showing the following: Dimensions of the dwelling, location and dimensions of the area where the home occupation will be conducted and the location of the one (1) square foot sign.
- One (1) electronic copy of the site plan emailed to jweaver@iberiagov.net
- Completed application form (including owner's signature)
- Affidavit of Ownership
- Any applicable Power of Attorney documents or signature authority documents
- Proof of ownership (**Must have page of recordation from Clerk of Court Office for recorded cash sale, donation etc., how did you acquire the property**) the application must be filed by the property owner(s). If the property is leased, the owner must file the application on behalf of the lessee, as the permit is granted to the property owner.
- Letters of support and/or a petition signed by the adjacent property owners supporting the request.
- The names and addresses of all adjacent property owners and second adjacent property owners shall be provided as per the latest tax assessor's tax rolls (property directly across a public road is considered to be adjacent property). The names and addresses should be turned into the Department of Planning & Zoning, the hard gum labels shall also include the Owner/Developer names and address **typed on mailing label (Avery 5160) & also emailed to Jacob Weaver (jweaver@iberiagov.net)** **The application will not be placed on the Meeting Agenda without proper mailing labels being received by submittal deadline to Planning and Zoning Department.**
- Required filing fee \$150.00 per application

ATTENDANCE

No action will be taken on any application unless the applicant or authorized agent is present at the Zoning Commission meeting.

To schedule a meeting regarding a variance application, or if there are any questions, contact Jacob Weaver at 337-492-5434.

2024 BOARD OF ZONING ADJUSTMENT SCHEDULE

SUBMITTAL DEADLINE 4:00 P.M.	BOARD OF ZONING ADJUSTMENT MEETING 5:30 P.M.
December 1, 2023	January 16, 2024
January 5, 2024	February 19, 2024
February 2, 2024	March 18, 2024
March 1, 2024	April 15, 2024
April 5, 2024	May 20, 2024
May 3, 2024	June 17, 2024
June 7, 2024	July 15, 2024
July 5, 2024	August 19, 2024
August 2, 2024	September 16, 2024
September 6, 2024	October 21, 2024
October 4, 2024	November 18, 2024
November 4, 2024	December 16, 2024
December 6, 2024	January 20, 2025