LEWES BOARD OF ADJUSTMENT

Application Instructions

(1) The Lewes Board of Adjustment is established pursuant to 22 Del. C. §321, as more fully set forth in Section 197-19 of the Municipal Code for the City of Lewes, and has the powers and responsibilities set forth in Section 197-19(C).

(2) The attached form – and all supporting documents – must be prepared and delivered to the Office of the Building Official, along with a $1,250.00 application fee, before the Board will consider an Application.

(3) An Application must be accompanied by plans or drawings that support or clarify the relief or permission requested.

(4) Select sections of the Municipal Code for the City of Lewes have been attached to this application packet for your convenience. Applicants, however, are encouraged to consult legal counsel to discuss the applicable legal standards.

(5) The Applicant shall have the burden of presenting sufficient information to the Board of Adjustment to enable it to make a determination. An Applicant should therefore be prepared to adequately support his or her position on the day of the scheduled hearing.

(6) An Applicant is permitted, but not required, to support his or her position during a Board of Adjustment hearing by presenting additional documents, maps, charts, graphs, photographs, or other visual representations.
LEWES BOARD OF ADJUSTMENT

Application for Variance, Special Exception, or Appeal of a Decision of the Building Official

I. The undersigned hereby gives notice of (check one):

☐ Request for a Variance (Section 197-92)
☐ Request for a Special Exception (Section 197-93)
☐ Appeal of a Decision of the Building Official (Section 197-91)

II. Applicant:

Location of Affected Property: _____________________________________________________

Tax Parcel Number: ______________________ Zoning Classification: ______________________

Applicable Section(s) of the Zoning Code: _____________________________________________

______________________________________________________________________________

Applicant Name: _______________________________ Representative: _______________________
(If there is more than one Applicant, please include the name(s) and address(es) of the additional applicant(s) on a separate sheet of paper.)

Mailing Address: __________________________________________________________________

Telephone Numbers: _____________ (Home) _____________ (Cell) _____________ (Work)

E-mail Address: ______________________________
III. Please complete this Section if you are requesting a Variance or Special Exception (attach additional sheets if necessary):

Please describe the affected property ____________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Please describe the relief or permission sought: ________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Basis for request (refer, in part, to Sections 197-92 or Section 197-93 of the Code for more information): ______
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Has an Application for Variance or Special Exception previously been submitted for this property? ____

If yes, please describe: _________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

IV. Please complete this Section if you are requesting an Appeal of a Decision of the Building Official (attach additional sheets if necessary):

Please summarize the Building Official’s decision or determination: ____________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

3
Please summarize the basis for your appeal: _________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

V. Applicant Certification: I (we) certify that all statements in this Application are true and correct to the best of my (our) knowledge.

Applicant Signature: ________________________________ Date: ________________

Applicant Signature: ________________________________ Date: ________________

Applicant Signature: ________________________________ Date: ________________

_____________________________________________________________________________________

Official Use Only

Date Application Received: ________________ Application Number: ________________

Amount Paid ________________

Received by: ________________________________