



Department of Planning and Zoning

DPZ Office Use only: Case No _____ Date Filed _____
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Administrative Adjustment to the Bulk Regulations

1. Bulk Regulation Adjustment Request

An administrative adjustment is requested from the bulk requirement given in Section _____ of the Zoning Regulations to reduce/increase the required _____

_____ (height, setback, etc.) from _____ to _____ in order to _____

This represents a _____ percent adjustment of the bulk requirement. (May not exceed 20%)

2. Petitioner's Name _____

Address _____

Phone No. _____ (W) _____ (H) _____

Email Address _____

3. Counsel for Petitioner _____

Counsel's Phone No. _____

Email Address _____

4. Property Identification

Address of Subject Property _____

Total Acreage of Property _____

Property Location _____

Election District _____ Zoning District _____

Tax Map # _____ Block # _____ Parcel/Lot # _____

Subdivision Name and File # (if applicable) _____

Site Development Plan File # SDP- _____

5. Petitioner's Interest in Subject Property

Owner (including joint ownership) Other (describe and give name and address of owner)

If the Petitioner is not the owner of the subject property, documentation from the owner authorizing the petition must accompany this petition.

6. A supplement must be attached which addresses each of the following criteria:

- (1) That there are unique physical conditions, including irregularity, narrowness or shallowness of lot or shape, exceptional topography, or other existing features peculiar to the particular lot; and that as a result of such unique physical conditions, practical difficulties and unnecessary hardships arise in complying strictly with the bulk provisions of these regulations.
- (2) The administrative adjustment, if granted, will not alter the essential character of the neighborhood or district in which the subject property is located; will not substantially impair the appropriate use or development of adjacent property; and will not be detrimental to the public welfare.
- (3) That such practical difficulties or hardships have not been created by the owner provided, however, that where all other required findings are made, the purchase of a lot subject to the restrictions sought to be varied shall not itself constitute a self-created hardship.
- (4) That within the intent and purpose of these regulations, the administrative adjustment, if granted, is the minimum necessary to afford relief.

7. Administrative Adjustment Plan

All plans must be folded to approximately 8 ½ x 14 inches. The plan must be drawn to scale and must include the items listed below:

- (a) Courses and distances of property lines
- (b) Size of property
- (c) North arrow
- (d) Scale of plan
- (e) Zoning of subject property and adjoining property
- (f) Tax map, parcel and lot number of subject property
- (g) Required setback or other bulk requirement, and the requested adjustment from the setback or other requirement
- (h) Existing and proposed uses, structures, natural features, landscaping, parking spaces, driveways, and points of access on the subject property
- (i) Location of well and private sewerage easement, if applicable
- (j) Floor area and height of structures, setback distances, and other numerical values necessary for examination of the petition
- (k) Any other information as may be necessary for full and proper consideration of the petition

8. Materials, Fees, Posting and Advertising

- a. **The original plus two (2) copies of this petition**, all supplemental pages or reports, and the required plans must be submitted.
- b. The undersigned agrees to pay all costs in accordance with the current schedule of fees. The fee is **\$300.00 plus \$25.00** for a poster. The undersigned also agrees to properly post the property at least 15 days immediately prior to the hearing, to maintain the posters as required, and to submit an affidavit of posting at the time of the hearing.

9. Signatures

The undersigned hereby affirms that all of the statements and information contained in, or filed with, this petition are true and correct.

The undersigned has read the instructions on this form, filing herewith all of the required accompanying information.

Signature of Petitioner

Signature of Attorney

For DPZ office use only:

Hearing fee: \$ _____
Poster fee: \$ _____
Total: \$ _____
Receipt No. _____

(Make checks payable to the "Director of Finance")

County Website: www.howardcountymd.gov

NOTE: No appointment is needed to submit this application and payment of fees is not due until a hearing date is set and you are notified.

Revised: 7/12

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