

**PLAN COMMISSION APPLICATION
WAIVER FROM DESIGN STANDARDS**

10645 Randolph Street
Winfield, IN 46307

Phone: (219) 662-2665
Fax: (219) 663-2431
www.winfield.in.gov



\$250.00 PER WAIVER REQUESTED (AG, R-1, R-2, R-3, & R-4 Zoning)
\$650.00 PER WAIVER REQUESTED (AG-B, MF, C-1, C-2, C-3, PDC, PDM, & M-1)
MUST BE FILED AT TIME OF FILING PRIMARY PLAT

WAIVER REQUESTED

REASON FOR WAIVER

§ 155.132 WAIVERS.

- (A) *General basis.* Where the Commission finds that extraordinary hardships or practical difficulties may result from strict compliance with these regulations and/or the purposes of this chapter may be served to a greater extent by an alternative proposal, the Commission may approve waivers to these subdivision regulations so that substantial justice may be done and the public interest secured, provided that the waivers shall not have the effect of nullifying the intent and purpose of these regulations; and further provided the Commission shall not approve waivers unless findings shall be made based upon the evidence presented to the Commission in each specific case that:
- (1) The granting of the waiver will not be detrimental to the public safety, health, or welfare or injurious to other nearby property;
 - (2) The conditions upon which the request for a waiver are based are unique to the property for which the waiver is sought and are not applicable generally to the property;
 - (3) Because of the particular physical surroundings, shape, or topographical conditions for the specific property involved, a particular hardship to the owner would result, as distinguished from a mere inconvenience, if the strict letter of this chapter is carried out;
 - (4) The waiver will not in any manner conflict with the provisions of Chapter 156 of this code or the Comprehensive Plan as interpreted by the Plan Commission; and
 - (5) Upon due deliberation and affirmative finding of divisions (A)(1) through (A)(4) inclusive of this section, the Commission may modify requirements, standards, and specifications so as to promote the public health, safety, and welfare, and prevent detriment to the use and value of the land, provided however, that nothing herein shall be construed as altering or conflicting with the duties of the Board of Zoning Appeals pursuant to I.C. 36-7-4-900 series, as currently amended.
- (B) *Conditions.* In approving waivers, the Commission may require conditions as will, in the Commission's judgment, secure substantially the objectives of the standards or requirements of these regulations.
- (C) *Procedures.* A petition for any waiver shall be submitted in writing by the subdivider at the time when the primary plat is filed for the consideration of the Commission with fees payable to the town in accordance with the schedule of fees adopted by town ordinance. The petition shall state fully the grounds for the application and all of the facts relied upon by the petitioner. The deadline for submitting waiver petition applications is the same as for primary plat applications.

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RESPONSIBILITY OF COSTS: FILING FEE IS DETERMINED BY TOWN CODE SECTION 150.26 (B). APPLICANT AND OWNER SHALL BE RESPONSIBLE FOR THE COSTS OF ALL REVIEWS FOR ENGINEERING FEES, LEGAL FEES, ETC.

IT SHALL BE THE RESPONSIBILITY OF THE PETITIONER OR THE AGENT TO SUBMIT (2) FULL-SIZE (24"X36"), (2) HALF-SIZE (12"X18"), AND (2) COPIES OF ALL DRAWINGS BOUND INTO ONE ELECTRONIC PDF FILE (1 PDF to Town @ nbellar@winfield.in.gov & 1 PDF to Town Engineer @ mduffy@dlz.com).

OWNER: _____ PHONE: _____
 ADDRESS: _____ EMAIL: _____
 PETITIONER/SUBDIVIDER: _____ PHONE: _____
 ADDRESS: _____ EMAIL: _____
 ENGINEER/SURVEYOR: _____ PHONE: _____
 ADDRESS: _____ EMAIL: _____
 GENERAL LOCATION: _____

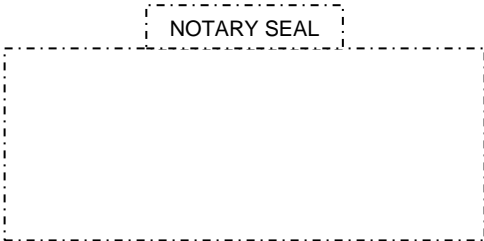
I HAVE READ AND FULLY UNDERSTAND THE ABOVE REQUIREMENTS AND/OR RESPONSIBILITIES REGARDING THE SUBMITTAL FOR A WAIVER IN THE TOWN OF WINFIELD.

SIGNATURE (S) OF OWNER (S) _____ SIGNATURE (S) OF PETITIONER (S) _____

BEFORE ME, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE, PERSONALLY APPEARED BEFORE THE ABOVE PETITIONER(S) AND OWNER(S) AND ACKNOWLEDGED THE EXECUTION OF THE ABOVE AND FOREGOING INSTRUMENT TO BE TRUE VOLUNTARY ACT AND DEED FOR THE USES AND PURPOSES THEREIN MENTIONED.

DATED THIS _____ DAY OF _____, 20 _____.

MY COMMISSION EXPIRES: _____



STATE OF _____
 COUNTY OF _____

 NOTARY PUBLIC SIGNATURE

 NOTARY PUBLIC PRINTED NAME

 COUNTY OF RESIDENCE

FOR OFFICE USE ONLY ↓

PC DOCKET #: _____ CHECK #: _____ DATE PAID: _____
 RECEIPT #: _____ FEE: _____ RECEIVED BY: _____

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AFFIDAVIT OF OWNERSHIP *

[I / We], being duly sworn, depose and say that [I am / We are] the [owner / owners] of fifty percent (50%) or more of the property involved in this application and that the foregoing signatures, statements, and answers herein contained and the information herewith submitted are in all respects true and correct to the best of [my / our] knowledge and belief.

Name	Address	Signature
Name	Address	Signature
Name	Address	Signature

The correspondent or agent [if different from owner(s)]

Name	Address	Signature
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STATE OF _____
COUNTY OF _____

NOTARY SEAL

Subscribed and sworn before me this _____ day of _____, 20_____.

My Commission Expires: _____

NOTARY PUBLIC SIGNATURE

County of Residence: _____

NOTARY PUBLIC PRINTED NAME

*** MUST BE FILED WITH PROOF OF OWNERSHIP
(EX: DEED, LEASE, ASSESSOR RECORDS) IN FORM ACCEPTABLE TO TOWN ATTORNEY
FOR EACH PROPERTY OWNER OF THE PLAT TO BE VACATED**