Village of Four Seasons Planning & Zoning
Attn: Village Clerk
133 Cherokee Road
Four Seasons, Missouri 65049
Phone: (573) 635-3833
Email: info@villageoffourseasons.com

**APPLICATION PROCEDURES**
**FOR BOARD OF ZONING ADJUSTMENT**

The Village of Four Seasons Board of Zoning Adjustment holds hearings as needed. Complete applications for Board of Zoning Adjustment review shall include the following:

1. Complete, concise legal description of the area in questions. Must be typed or a copy of an official document, (i.e. abstract, warranty deed, tax receipt, etc.).

2. Application completed and signed by the property owner. An application is attached; additional applications are available in the Village Clerk's office.

3. Site plan showing existing buildings, proposed buildings, distances from property lines, etc. Site plan should be accurate and to an acceptable scale.

4. Location sketch or plat of the land, showing adjoining and abutting tracts and the owners of those tracts (may be included on site plan).

5. Letter describing the request and any past and present issues related to the request. The letter should be concise, legible and addressed to the Board of Adjustment.

6. Filing fee for Board of Zoning Adjustment case review is $750.00. Postage shall be determined by the rate for certified/return receipt mail (at the time of application) for each property owner adjacent to subject property. The Village Inspector, prior to payment and filing with the Village Clerk, shall review all application materials. Filing fees are non-refundable.

Incomplete applications shall be removed from the Board agenda. Application materials will be returned to the applicant via regular mail.

Deliver application materials to the address listed above.

**VILLAGE OF FOUR SEASONS, MISSOURI**
**BOARD OF ZONING ADJUSTMENT**
**QUESTIONNAIRE**

SIZE OF PROPERTY: _____

SOURCE OF UTILITIES:

WATER: _____ GAS: _____

SEWER: _____ ELECTRIC:_____

PRESENT USE OF PROPERTY: _____

PRESENT ZONING OF PROPERTY: _____

HAVE YOU PREVIOUSLY APPLIED FOR A VARIANCE ON THIS PROPERTY? _____

IF SO, WHEN? _____

HOW LONG HAVE YOU OWNED THE SUBJECT PROPERTY? _____

PLEASE LIST ANY EXISTING STRUCTURES ON THE PROPERTY AND THE YEAR BUILT. _____

_____

_____

DO YOU OWN ANY PROPERTY ADJACENT TO THE SUBJECT PROPERTY? _____

WHY, IN YOUR OPINION, IS YOUR CURRENT SITUATION, AND OR THE EXISTING SIZE /EXTENT OF THE USE NOT ACCEPTABLE? _____

_____

_____

_____

IS THERE ANY PARTICULAR HARDSHIP RELATED TO YOU OR YOUR PROPERTY OF WHICH THE BOARD SHOULD BE AWARE? _____

_____

_____

_____

_____

LIST SPECIAL CIRCUMSTANCES WHICH ARE PECULIAR TO THE LAND STRUCTURE OR BUILDING IN QUESTION AND DO NOT GENERALLY APPLY TO THE NEIGHBORING LANDS, STRUCTURES OR BUILDINGS IN THE SAME DISTRICT OR VICINITY. _____

_____

_____

_____

_____

LIST REASONS WHY STRICT APPLICATION OF THE PROVISIONS OF THE ZONING ORDINANCE WOULD DEPRIVE YOU OF REASONABLE USE OF THE LAND, STRUCTURE OR BUILDING IN A MANNER EQUIVALENT TO THE USE PERMITTED TO BE MADE BY OTHER OWNERS OF NEIGHBORING LANDS, STRUCTURES OR BUILDINGS IN THE SAME DISTRICT. _____

_____

_____

_____

_____

NOTE: Applications must be accompanied by additional information as outlined in the Application Procedures (Page 1 of this packet). The Village Officer(s) will review the application for Variance and determine if sufficient date is contained to adequately describe the situation to the Board of Adjustment. If the date is not adequate, the Village Officer(s) shall return the application to the applicant for additional information. Only completed applications shall be forwarded to the Board of Adjustment.

The signers of this application request that the Board of Adjustment of the Village of Four Seasons, Missouri approve a variance from the strict application of the terms of the Village Code. We, the undersigned, do attest to the truth and correctness of all facts and information presented with this application under penalty of law.

SIGNATURE OF APPLICANT: _____

SIGNATURE OF PROPERTY OWNER: _____

Checks should be made payable to the Village of Four Seasons, Missouri. Postage costs should be calculated and submitted with the $750.00 filing fee.

STATE OF MISSOURI )
) ss.
COUNTY OF CAMDEN )

Subscribed and sworn to me before me, the _____ day of _____20_____.

Notary Public _____

My Commission expires: (stamp) (seal)

Date Submitted: _____

**VILLAGE OF FOUR SEASONS, MISSOURI**
**BOARD OF ZONING ADJUSTMENT**
**REQUEST FOR REVIEW**

NAME OF APPLICANT: _____

MAILING ADDRESS: _____

_____

_____

TELEPHONE: _____

LOCATION OF PROPERTY: Be specific. Give directions to property. Include Lake Road and lot number. Attach legal description of property to this application. Please mark property in some way, i.e., distance from property lines with red paint, flags or stakes, indicating location of proposed variance.

_____

_____

_____

_____

VARIANCE FOR/FROM:

_____

APPEAL FOR/FROM:

_____

List names and mailing addresses of the current adjoining property owners: (Attach a separate sheet if necessary)

NAME COMPLETE ADDRESS/WITH ZIP CODE

_____

_____

_____

_____

_____

_____