

Fairbanks North Star Borough
Department of Community Planning
907 Terminal Street/P.O. Box 71267
Fairbanks, Alaska 99707-1267
(907) 459-1260
planning@fnsb.gov



ADMINISTRATIVE VARIANCE APPLICATION FOR SETBACKS

For Office Use Only

Received By: _____

Receipt No.: _____

Sign #: _____

Date Submitted: _____

File #. _____

*****FEES ARE NON-REFUNDABLE*****

FEES: ☐ \$350 administrative variance application
☐ \$300 sign deposit

Applicant:		Property Owner:
Contact Name:		Name:
Business Name:		Mailing Address:
Mailing Address:		City, State Zip:
City, State Zip:		Phone:
Phone:	Cell:	Cell:
E-mail:		E-mail:

Property Information:	
Property Description (Lot, Block, Subdivision /TL, Sec, Township Range):	
Street Address:	Lot Size:
Parcel Account Numbers (PAN):	Zoning District:
Existing Use(s):	

Variance Request Information:
<u>Setback Request:</u> ☐ Front: _____ ☐ Rear: _____ ☐ Side: N / S / E / W _____ ☐ Side: N / S / E / W _____
<u>Request Description:</u>

Please include any information regarding the applicability of reasonable accommodations for a person having a disability pursuant to FNSBC 18.12.030.

APPLICANT SIGNATURE: _____ DATE: _____

OWNER SIGNATURE (if different): _____ DATE: _____

If the applicant is not the sole property owner, written consent of all property owners must be provided (FNSBC 18.104.060(B)).

Fairbanks North Star Borough is subject to the Alaska Public Records Act, AS 40.25 et seq. and this document may be subject to public disclosure under state law.

ADMINISTRATIVE (SETBACK) VARIANCE REQUIRED SUBMITTALS CHECKLIST

- ❶ **Attach** a detailed written narrative that addresses the all of following criteria set forth in FNSBC **18.104.060(D)**:
- 1.a Provide evidence that **"the relevant area of the building for which the setback variance is requested was built prior to April 25, 1988, or the setback violation existed when the when the property was purchased by the current owner prior to July 21, 2010"**
 - 1.b Show **"the setback variance request is for 50 percent or less of the yard requirement"**
 - 1.c Describe how **"the setback variance request meets the state requirements set forth in AS 29.40"**
 - 1.d Describe how **"the setback variance will not be injurious to the health, safety or welfare of the neighborhood."**

AS 29.40.040 (b) a variance from a land use regulation adopted under this section may not be granted if

- (1) Special conditions that require the variance are caused by the person seeking the variance;**
- (2) The variance will permit a land use in a district in which that use is prohibited; or**
- (3) The variance is sought solely to relieve pecuniary hardship or inconvenience.**

*Please note, at any time you may request to review the documents contained in any open case file prior to final action.



DEPOSIT / REFUND FORM
PUBLIC NOTICE SIGN DEPOSITS &
EXPERT REVIEW DEPOSITS

FILE/CASE # _____

SIGN DEPOSIT

Sign # _____
(if required)

DATE Prepared: _____

Prepared By: _____
Fairbanks North Star Borough

Contact Phone #: _____

RECEIPT Number: _____

Contact Email: _____

PAID By: Cash ☐ Check ☐ # _____ Credit Card ☐ Last 4 digits # _____

(if paying by check we **MUST** refund to name & address showing on check)

Name & Address on Check _____

Name & Contact # on Credit Card _____

If cash name and address for refund: _____

APPLICANT SIGNATURE: _____ DATE: _____

IF SIGN IS LOST, STOLEN, OR DAMAGED THE APPLICANT IS RESPONSIBLE FOR THE ENTIRE COST OF A REPLACEMENT

SIGN REFUNDS

Sign Returned: _____ Date: _____

Initiate Refund: ☐ YES ☐ NO

Staff who took sign in: _____

Be sure application has been completely acted on and the reconsideration has expired prior to taking in the sign.
For Rezones, be sure the Assembly decision is final prior to taking in the sign.

Additional Damage Yes ☐ No ☐

Partial Refund ☐ Yes \$ _____

Describe _____

Applicant Initial _____

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Post By: _____
Date

Instructions to comply with FNSBC 18.104.010.C.3:

1. Post the sign(s) in accordance with #2 below.
2. Take a photograph of the posted sign.
3. Return this affidavit and the photograph to the Department of Community Planning at least 20 days prior to the Planning Commission meeting (see the 'Post By' date). If these items are not received by the 'Post By' date, your application may be postponed to a future meeting.
4. This affidavit must be notarized. The Borough has notaries on staff or you may use your own notary.

PUBLIC NOTICE SIGN POSTING AFFIDAVIT

STATE OF ALASKA)
) ss.
FOURTH JUDICIAL DISTRICT)

I, _____, being first duly sworn, depose and state that:

1. I have submitted an application identified as _____.
2. I have posted and will maintain public notice sign # _____ in accordance with the following provisions:
 - a. Sign is posted on the property on which my request for rezone, conditional use or variance has been made.
 - b. Sign is clearly visible from streets and roads.
 - c. Sign will be maintained free of snow or other materials which impede readability.
 - d. Sign is posted between an elevation of 2' and 8' above ground level and no further than 50' from the edge of the road to further ensure readability from streets.
 - e. Sign was posted on _____ (date) and complies with posting requirements of 20 days prior to the public hearing date.
 - f. I shall return the sign to the FNSB Department of Community Planning within 10 days following the final public hearing.
3. I understand a refund check of **\$300.00** (the amount I have deposited for said sign) will be issued 7-10 days following return of the sign providing that sign is returned in usable condition. I further understand I may receive only partial refund if the sign is damaged when returned to the Borough.
4. This document is null and void when necessary action has been completed as provided in Item #2 f.

Signature

(Print Name and Address of Affiant)

SUBSCRIBED AND SWORN TO BEFORE ME on this _____ day of _____, 20_____

Notary Public in and for Alaska

Commission Expires