Planning & Building Services Department
300 E Pike St | Crawfordsville, IN 47933
crawfordsville.in.gov | 765-364-5152

APPEAL OF ADMINISTRATIVE DECISION APPLICATION

OFFICE USE ONLY

DOCKET # _____ FILED DATE: _____

FILING FEE: $ _____

APPLICANT INFORMATION

Applicant Name: _____ Phone: _____

Business Name: _____ Email: _____

Address: _____

Property Owner's Name: _____ Phone: _____

Business Name: _____ Email: _____

Address: _____

Representative's Name: _____ Phone: _____

Business Name: _____ Email: _____

Address: _____

PROPERTY AND PROJECT INFORMATION

Project to be known as: _____

Address or Property Location: _____

Acreage: _____ (Attach Legal Description) Existing Land Use: _____

County Parcel ID #(s): _____

Zoning District: _____

I certify that I own or control the property involved in this application, and that the information in this application is true and correct.

_____
Signature of Applicant/Representative

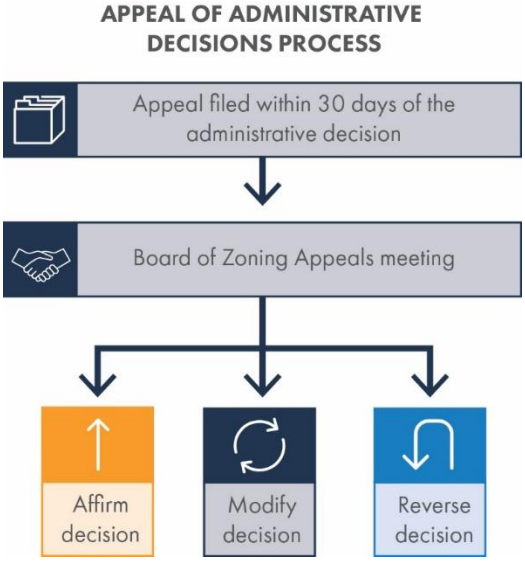
_____
Print Name

_____
Date

Planning & Building Services Department
300 E Pike St | Crawfordsville, IN 47933
crawfordsville.in.gov | 765-364-5152

APPEAL OF ADMINISTRATIVE DECISION APPLICATION INSTRUCTIONS

For comprehensive information on ***Appeals of Administrative Decisions***, please refer to ***Chapter 8 of the Unified Development Ordinance***.



A. **Description**. There may be situations where a property owner or another party believes the Administrator made an error in administering this Ordinance. The BZA reviews alleged administrative errors, unless otherwise required by local or Indiana law.

B. **Initiation.** Anyone disagreeing with a final decision of the Administrator may file an appeal to the BZA. If an appeal of an enforcement action is filed according to this article, the Administrator takes no further enforcement action on the matter pending the Board's decision, except for unsafe circumstances presenting an immediate danger to the public.

C. **Applications.** Within 30 days of the decision being appealed, the applicant files:

1. An administrative appeal application;
2. The applicable filing fee;
3. Copies of all materials pertaining to the decision being appealed;
4. Copies of any written decisions that are the subject of the appeal; and
5. A letter describing the reasons for the appeal, noting specific sections of this Ordinance and other applicable standards as the basis for the appeal.

D. **BZA Review.** At a regularly scheduled meeting, the BZA reviews the administrative appeal application and supporting information.

1. Representation: The applicant or applicant's representative must be present at the meeting to present the appeal.
2. Testimony: At the meeting, the BZA will consider a report from the Administrator and enforcing party, testimony from the applicant, and testimony from witnesses and interested parties.
3. Procedures: The conduct of the hearing follows the Rules and Procedures of the Board.

E. **Decision.** The BZA may affirm, affirm with modifications, reverse, or continue the appeal.

1. Affirm: If the BZA finds the administrative decision was consistent with the provisions of this Ordinance, the BZA affirms the determination in writing.
2. Affirm with Modifications: If the BZA determines the proper interpretation is not consistent with the administrative decision nor the interpretation requested by the applicant, the BZA will affirm the determination with modifications in writing.
3. Reverse: If the BZA finds the administrative decision was inconsistent with the provisions of this Ordinance, the BZA reverses the determination in writing.
4. Continuances: The appeal may be continued based on a request by the Administrator or applicant, an indecisive vote, or a determination by the BZA that additional information is required before action is taken on the request. The continuing of applications follows Rules and Procedures of the Board.

Planning & Building Services Department
300 E Pike St | Crawfordsville, IN 47933
crawfordsville.in.gov | 765-364-5152

PROPERTY OWNER AFFIDAVIT

IN WITNESS WHEREOF, the undersigned, having duly sworn, upon oath says they are the owners of the property involved in this application and that they hereby acknowledge and consent to the foregoing Application.

Property Owner (Signature) _____ Property Owner (Printed Name) _____

Before me the undersigned, a Notary Public in and for said County and State, personally appeared the above party, who having been duly sworn acknowledged the execution of the foregoing instrument.

Witness my hand and Notarial Seal this _____ day of _____, 20_____.

State of _____, County of _____, SS:

_____
Notary Public Signature

_____
Notary Public (Printed Name)

Planning & Building Services Department
300 E Pike St | Crawfordsville, IN 47933
crawfordsville.in.gov | 765-364-5152

EXAMPLE PUBLIC NOTICE (BOARD OF ZONING APPEALS)

NOTICE IS HEREBY GIVEN THAT the Crawfordsville Board of Zoning Appeals will hold a public hearing on Time of BZA Meeting. at Location of BZA Meeting, to consider petition(s) [insert docket #], filed by [insert representative's name (if applicable)] on behalf of [insert applicant's or property owner's name]. The request pertains to real estate comprising approximately [insert #] acres and generally located at [insert address or intersection location], Crawfordsville, Indiana.

The request is for approval of a [insert application type (e.g., Variance of Use, Variance of Development Standards, Special Exception)] to allow [insert project description].

Specific details regarding this request, including the application, file, and property legal description, may be obtained from the Planning & Building Services Department, or by calling 765-364-5152.

Written suggestions or objections relative to the request may be filed with the Planning & Building Services Department, at or before the public hearing. Interested persons desiring to present their views upon the request, either in writing or verbally, will be given the opportunity to be heard at the above mentioned time and place. Such hearing may be continued from time to time as may be found necessary.

Please review the agenda for this meeting on the City's website (*www.crawfordsville.in.gov*) immediately prior to the scheduled meeting time to confirm that this item has not been continued to the following meeting or that the meeting has not been cancelled.

APPLICANT:
[Enter contact information]

REPRESENTATIVE:
[Enter contact information]

City of Crawfordsville

300 E Pike St, Crawfordsville IN 47933

765-364-5152

www.crawfordsville.in.gov

Planning & Building Services Department
300 E Pike St | Crawfordsville, IN 47933
crawfordsville.in.gov | 765-364-5152

AFFIDAVIT OF NOTICE OF PUBLIC HEARING

Docket #: _____ Public Hearing Date: _____

Applicant's Name: _____

Representative's Name: _____ Company: _____

Project to be Known As: _____

Application Type: ☐ Standard Zoning District ☐ Planned Unit Development District ☐ Text Amendment
☐ Primary Plat ☐ Secondary Plat ☐ Site Plan ☐ Board of Zoning Appeals

PUBLIC NOTICE AFFIDAVIT

IN WITNESS WHEREOF, the undersigned, having duly sworn, upon oath does hereby certify that notice of public hearing to consider above petition was sent by certified, registered or first class mail to the last known address of each of the following persons, as attached hereto as **Exhibit A**, they being all persons to whom notice was required to be sent by the Plan Commission or Board of Zoning Appeals' Rules of Procedure (as applicable), and that said notices were postmarked on the _____ day of _____, 20_____, being at least ten (10) days prior the scheduled public hearing.

I (We) further certify that the notice required to be posted on the subject property described in the above petition was posted on the subject property in accordance with the Plan Commission's or Board of Zoning Appeals' Rules of Procedures (as applicable) on the _____ day of _____, 20_____, being at least ten (10) days prior the scheduled public hearing.

_____ _____
Applicant/Representative (Signature) Applicant/Representative (Printed Name)

Before me the undersigned, a Notary Public in and for said County and State, personally appeared the above party, who having been duly sworn acknowledged the execution of the foregoing instrument.

Witness my hand and Notarial Seal this _____ day of _____, 20_____.

State of _____, County of _____, SS:

_____
Notary Public Signature

_____
Notary Public (Printed Name)