



**CITY OF CHELAN**  
**DEPARTMENT OF COMMUNITY DEVELOPMENT**  
 135 E JOHNSON AVENUE / PO Box 1669, CHELAN WA 98816  
 TELEPHONE: (509) 682-8017

## VARIANCE APPLICATION

**Parcel Number (APN):** \_\_\_\_\_ **Lot Size:** \_\_\_\_\_ (Acres)  
**Parcel Address:** \_\_\_\_\_ **City/Zip:** \_\_\_\_\_  
**Abbreviated Legal Description:** \_\_\_\_\_  
**Property Owner(s):** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**City/State/Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_

**Applicant** (if different from owner): \_\_\_\_\_ **Company Name:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Variance Request Description (Include applicable code section for which variance is requested):** CMC 17.64 \_\_\_\_\_

### Submittal Requirements:

The variance application will be accepted upon receipt of the following required submittal items. Additional information may be requested by staff if determined necessary for the proposed request.

- ☐ Complete Application form with responses to variance criteria (on page 2)
- ☐ Site Plan, drawn to scale
- ☐ Construction plans (if applicable)
- ☐ Studies & Reports (if applicable)
- ☐ Application fee(s) per the City of Chelan's current Rate & Fee Schedule - \$300

### Acknowledgement

- The information, plans, maps, and other materials submitted with this application are, to the best of my/our knowledge, a true and accurate representation of this proposal.
- The City of Chelan does not guarantee success of this permit application, or approval by the Hearing Examiner
- All persons executing this acknowledgement shall be personally liable and hereby personally guarantee payment of all fees, expenses and costs required by this application.
- If the property owner(s)/Applicant fail to respond to the Department's request for additional information, orally, or in writing within the designated time frame, further processing shall be suspended or postponed.

**I hereby certify that I will pay all fees as required by law. I also hereby certify under penalty of perjury under the laws of the State of Washington that the above answers are true and complete to the best of my knowledge. I understand that the lead agency is relying on them to make its decision.**

**Owner Signature:** \_\_\_\_\_ **Applicant Signature:** \_\_\_\_\_  
**Print Name:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_  
**Place:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Place:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **Chelan Municipal Code – Chapter 17.64 - Variances**

Applications for variances from the terms of the zoning ordinance, the official map ordinance, or other land use regulatory ordinances under procedures and conditions prescribed by this title or other provisions in the Chelan Municipal Code, except as provided in Section 17.64.030, relating to administrative adjustments, shall be granted only if the hearing examiner finds that all the listed conditions exist.

**Please respond to Conditions A – E below.** Responses can also be provided as a separate attachment to the application.

**A. Explain how the variance will not constitute a grant of special privilege inconsistent with the limitation upon uses of other properties in the vicinity and zone in which the property on behalf the application was filed is located.**

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**B. Explain how the variance is necessary, because of special circumstances relating to the size, shape, topography, location or surroundings of the subject property, to provide it with use rights and privileges permitted to other properties in the vicinity and in the zone in which the subject property is located.**

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**C. Explain how the granting of such variance will not be materially detrimental to the public welfare or injuries to the property of improvements in the vicinity and zone in which the subject property located.**

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**D. Explain how the variance is not sought for a financial nature; hardships that are self-created and hardships which are personal to the owner and not to the property shall not be grounds for a variance.**

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**E. Explain how the granting of such variance will not amount to a rezone nor authorize any use not allowed in the district.**

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## OWNERSHIP CERTIFICATION

I, \_\_\_\_\_, hereby certify that I am the major property owner(s) or officer of the corporation owning the property described in the attached application. I also hereby certify under penalty of perjury under the laws of the State of Washington that this application and that the statements, answers, and information are in all respects true and correct to the best of my knowledge and belief. I have also familiarized myself with the rules and regulations of the City of Chelan

Property Address: \_\_\_\_\_ Project Desc.: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City and State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For: \_\_\_\_\_  
(Corporation or company name)

Parcel No.: \_\_\_\_\_

## ACKNOWLEDGMENT

State of Washington )

)

County of Chelan )

On this day personally appeared before me \_\_\_\_\_ to be known to be the individual described in and who executed the within and foregoing instrument and acknowledge to me that (*he, she, they*) signed as the \_\_\_\_\_ of \_\_\_\_\_, as the free and voluntary act and deed for the uses and purposes therein mentioned.  
(Title)  
(Corp. or company name)

\_\_\_\_\_  
NOTARY PUBLIC in and for the State of Washington

Commission Expires: \_\_\_\_\_

Residing in: \_\_\_\_\_

Date: \_\_\_\_\_

Other property owners included in this application must be listed below: (attach additional sheet if necessary)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_