



City of
BELL GARDENS

7100 Garfield Avenue • Bell Gardens, California 90201 • 562.806.7700 • Fax 562.806.7720 • www.bellgardens.org

VARIANCE APPLICATION
Planning Division

Permit Fee: \$450

PROJECT ADDRESS OR GENERAL LOCATION

Dirección del proyecto

FILE NO.

APPLICANT/APPLICANT'S REPRESENTATIVE

Nombre del solicitante o representante

DATE REC'D

MAILING ADDRESS *Dirección*

REC'D BY

CITY/STATE/ZIP CODE *Ciudad/Estado/Zona Postal*

TELEPHONE *Teléfono*

Office Use Only

PAID (\$450) _____

PROPERTY OWNER *Nombre del propietario*

OWNER MAILING ADDRESS *Dirección del propietario*

CITY/STATE/ZIP CODE *Ciudad/Estado/Zona Postal*

OWNER TELEPHONE NUMBER *Teléfono del propietario*

CURRENT ZONING & LAND USE OF THE SUBJECT SITE

APPLICANT'S REQUEST

It is hereby requested that the Planning Commission grant a variance from the provisions of the Bell Gardens Zoning Ordinance because; (Please describe in detail the reasons for the variance requested).

APPLICANT'S STATEMENT OF FACTS

According to the Bell Gardens Zoning Ordinance, the Planning Commission must make certain findings before approving a Variance. To assist the Commission in making these findings, please answer the following questions (Please provide a detailed explanation for each one of the questions).

1. Will the strict, literal interpretation of the Zoning Ordinance result in practical difficulty or unnecessary physical hardships inconsistent with the objectives of the Zoning Ordinance?

2. Are there exceptional circumstances or conditions applicable to the property involved which do not apply generally to other properties in the same zoning district?

3. Will a strict interpretation of the Zoning Ordinance deprive you of privileges enjoyed by owners of other properties in the same zoning district?

4. Will approval of this variance be detrimental to the public health, safety, or welfare; or materially injurious to properties or improvements in the vicinity?

AFFIDAVIT

STATE OF CALIFORNIA)
COUNTY OF LOS ANGELES) SS
CITY OF BELL GARDENS)

I, _____, being duly sworn, depose and say that I am the applicant in the foregoing application, that I have read the foregoing application and know the content thereof and state that the same is true and correct to the best of my knowledge. Furthermore, all information and data submitted to the City of Bell Gardens in support of my application is true and correct to the best of my knowledge.

APPLICANT (SIGNATURE)

ADDRESS

CITY/STATE/ZIP

PHONE

I, _____, the owner (if other than the applicant) of the real property involved in this application, do hereby consent to the filing of this application.

OWNER (SIGNATURE)

ADDRESS

CITY/STATE/ZIP

PHONE

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

Notary Public
County of Los Angeles
State of California

VARIANCE FILING PROCEDURE

The variance procedure provides some flexibility in the application of development standards when special circumstances exist pertaining to the size, shape, topography, or location of a site which deprives the property of privileges enjoyed by other properties in the vicinity and in the same zoning district. Variances are intended to resolve practical difficulties caused by the physical characteristics of the property and are not intended to constitute a granting of special privileges. Variances may not be granted to allow uses not otherwise permitted in a zone nor to allow exceptions to density standards, as such authority is precluded by State law. The Planning Commission may grant variances from the development standards of the Zoning Ordinance pertaining to the regulation of site features such as parking, landscaping, setbacks, walls, building height, signs, open space, lot coverage and site area.

PROCEDURE

1. Preliminary review of proposed project.
2. Upon completion of the preliminary review, submit the Variance application and filing materials to the Community Development Department at least sixty (60) days prior to the Planning Commission meeting.
3. City prepares all required documentation pursuant to the California Environmental Quality Act (CEQA) Guidelines. Public hearing notices are mailed by the City to surrounding property owners.
4. Planning Commission reviews the proposed project. Planning Commission meets the third Wednesday of each month at 6:00 P.M. at City Hall, 7100 S. Garfield Avenue, Bell Gardens. **IT IS STRONGLY RECOMMENDED THAT THE APPLICANT AND/OR HIS REPRESENTATIVE BE PRESENT AT ALL PUBLIC HEARINGS.**
5. If the Variance is denied by the Planning Commission, the applicant may appeal to the City Council within 15 days from the Planning Commission meeting pursuant to the provisions of Section 9.58.090 of the Bell Gardens Zoning Ordinance.

FINDINGS FOR APPROVAL

Pursuant to Section 9.50.060 of the Bell Gardens Zoning Ordinance, prior to approval of a Variance, the Planning Commission must make the following findings:

1. That the variance is necessary for the preservation of a substantial property right of the owners, and that such variance will not be materially detrimental to the public welfare nor to the property of other persons located in the vicinity thereof, or
2. That there are special circumstances applicable to the property, including size, shape, topography, location or surroundings in which the strict application of the zoning ordinance deprives such property of privileges enjoyed by other property in the vicinity and under identical zoning classification, or
3. That the variance shall not constitute a grant of special privilege inconsistent with the limitations upon other property in the vicinity and zone in which such property is located, or

4. That the variance shall not be granted for a parcel or property that authorizes a use or activity which is not otherwise expressly authorized by the zone regulation governing the parcel of property, or
5. That there are practical difficulties or unnecessary hardships in the way of carrying out the strict letter of the ordinance; and in granting such variance, the spirit of the ordinance will be observed, public safety will be secured, and substantial justice will be done.

In addition to the above mentioned findings, Section 65906 of the California Government Code requires the following findings be made:

1. Variances shall be granted only when, because of special circumstances applicable to the property including size, shape, topography, location, or surroundings.
2. Any Variance granted shall be subject to such conditions as will assure that the adjustment thereby authorized shall not constitute a grant of special privileges inconsistent with the limitations upon other properties in the vicinity and zone in which such property is situated.
3. The Variance shall not be granted for a parcel or property that authorizes a use or activity which is not otherwise expressly authorized by the zone regulation governing the parcel or property.

FILING REQUIREMENTS

- ___ 1. Application completed, signed and notarized.
- ___ 2. Environmental information form completed and signed.
- ___ 3. Ten sets of plans drawn to scale, neat and legible, to include but not limited to:
 - a. Vicinity map
 - b. Site Plan
 - c. Floor Plan
 - d. Building Elevations
- ___ 4. One set of plans reduced to 8 ½" x 11" (black and white).
- ___ 5. Applicant must also submit the site plan, floor plans and building elevations on colored presentation boards and CD.
- ___ 6. Sample color and material board.
- ___ 7. Radius map indicating properties within 500 feet of the subject property (radius map must be drawn from all four corners or exterior boundaries of the subject site with the names and addresses of all property owners located within 500 feet). The radius map must include all names of streets and block numbers. Applicant must submit an 8 1/2" by 11" copy of the radius map. The map must also be submitted on a CD. The applicant must submit two sets of labels and a copy of the property ownership list. The labels must be consecutively numbered and these numbers must correspond to the numbers on the property ownership list. The applicant must submit a notarized affidavit signed by the person who prepared the radius map and labels. The names and addresses may be obtained from:

- a. Los Angeles Tax Assessors Offices
Los Angeles Office; Hall of Administration
500 West Temple Street, Room 291
Los Angeles, CA 90012
(213) 974-3363
8:00 A.M. – 4:00 P.M., M-F
- b. A Licensed Mapping Company
- c. The City of Bell Gardens for a fee of \$302

____ 8. Filing fees.

____ 9. A copy of the latest Title Report.

All required documents must be filed with the Community Development Department at least sixty (60) days prior to the Planning Commission meeting.

Questions may be addressed to the Community Development Department at Bell Gardens City Hall, 7100 Garfield Avenue, Bell Gardens, CA 90201; (562) 806-7700, extension 7724, Monday through Thursday from 7:30 A.M. to 6:00 P.M.

INCOMPLETE APPLICATION PACKAGES WILL NOT BE ACCEPTED

**SAMPLE AFFIDAVIT
CERTIFIED PROPERTY OWNERS LIST**

STATE OF CALIFORNIA)
CITY OF BELL GARDENS) SS
COUNTY OF LOS ANGELES)

I, _____, hereby certify that the attached list contains the names and addresses of all persons to whom all property is assessed as they appear on the latest available assessment roll of the County of Los Angeles within the area described in the attached application and for a distance of five hundred (500) feet from the exterior boundaries of property legally described on the attached application.

DATE

NAME

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

NOTARY PUBLIC

SAMPLE PROPERTY OWNERS LIST

(1)
6227-026-900
Name
Address
City, State, Zip

(2)
6227-026-900
Name
Address
City, State, Zip

(3)
6227-026-900
Name
Address
City, State, Zip

(4)
6227-026-900
Name
Address
City, State, Zip

(5)
6227-026-900
Name
Address
City, State, Zip

(11)
6227-026-900
Name
Address

(12)
6227-026-900
Name
Address

(6)
6227-026-900
Name
Address
City, State, Zip

(7)
6227-026-900
Name
Address
City, State, Zip

(8)
6227-026-900
Name
Address
City, State, Zip

(9)
6227-026-900
Name
Address
City, State, Zip

(10)
6227-026-900
Name
Address
City, State, Zip

(13)
6227-026-900
Name
Address
City, State, Zip

(13)
6227-026-900
Name
Address
City, State, Zip

SAMPLE VICINITY MAP

