

Revised 3/2/22

YORK COUNTY
BOARD OF ZONING APPEALS
SPECIAL EXCEPTION INSTRUCTIONS & APPLICATION

ALL MEETINGS ARE HELD IN THE COUNCIL CHAMBERS IN THE YORK COUNTY GOVERNMENT COMPLEX LOCATED AT 6 S. CONGRESS IN YORK AT 6:00 P.M.

THE ATTACHED APPLICATION MUST BE FILLED OUT COMPLETELY. A \$350.00 APPLICATION FEE IS REQUIRED FOR THIS REQUEST. CONCEPTUAL SITE PLAN APPROVAL FOR THE SPECIAL EXCEPTION MUST BE OBTAINED BY STAFF PRIOR TO SUBMITTAL OF THE SPECIAL EXCEPTION APPLICATION. BASED ON THE PROPOSED USE, A TRAFFIC IMPACT ANALYSIS (TIA) MAY BE REQUIRED AND MUST BE SUBMITTED PRIOR TO ACCEPTING THE SPECIAL EXCEPTION APPLICATION AND APPROVED PRIOR TO PRESENTING THE REQUEST TO THE BOARD OF ZONING APPEALS.

THE FOLLOWING INFORMATION CORRESPONDS WITH THE SPECIAL EXCEPTION APPLICATION. THESE INSTRUCTIONS ARE PROVIDED TO AID THE INDIVIDUAL IN UNDERSTANDING WHAT INFORMATION IS REQUIRED TO BE SUBMITTED.

GENERAL INFORMATION:

APPLICANT: This is the person who will represent the property owner(s) at the public hearing. Fill in name, full address, and phone numbers.

PROPERTY OWNER: This is the person that is listed with the Tax Assessor as the property owner. Fill in name, full address, and phone numbers.

PROPERTY INFORMATION:

PROPERTY ADDRESS: Provide the address of the property. The address can be obtained from the York County Public Safety/Communications Department at 803-909-7482 or 803-909-7483 or by accessing the County GIS.

PROPERTY DIRECTIONS: Give specific directions to the property. Begin with a major, heavily traveled road. Landmarks, directional language (north, south, etc.), and distances should be included.

PROPERTY CONDITIONS: Explain the vegetative cover and topography of the land. Examples: partially wooded and sloping from rear to front or front no trees and flat with back wooded and rolling.

PROPERTY TAX MAP #: The Property Tax Map Number can be found on the property tax notice, obtained by calling 803-684-8526, or by accessing the County GIS.

PLAT (SURVEY) OF PROPERTY: This can be obtained from the property owner or the York County Register of Deeds. Indicate, on the plat, the approximate location and distance of all structures and dwellings in relation to all property lines. If a plat does not exist, the deed that indicates property line distances (metes and bounds) will be accepted.

LOT AREA: In this space, provide the size (area) of the lot. You may use either acreage or square footage.

ZONING DISTRICT: Fill in the zoning classification(s) that encumber the property.

USE OF PROPERTY: Describe, in general terms, the current use of the property.

PRELIMINARY SITE ANALYSIS: Based upon the proposed use, a Traffic Impact Analysis may be required and must be submitted prior to the Planning Department accepting the special exception application and prior to presenting the application the Board of Zoning Appeals.

To start this process, please contact the York County Transportation Planner at 803-909-7224. At a minimum, a Preliminary Site Analysis will need to be submitted and approved by the York County Transportation Planner outlining the following

information:

1. Existing use or last known use and date of last known use for structures that have been unoccupied for longer than six months;
2. Total acreage for the project;
3. Proposed use; and
4. Total square footage for buildings (existing and proposed).

Staff will review the preliminary site evaluation and determine the appropriate Traffic Impact Analysis to be performed, if any. Staff may determine the proposed use will have no impact or minimal impact on the transportation network, and further study is not required.

RELEVANT FACTORS PERTAINING TO THE SPECIAL EXCEPTION:

APPLICATION INFORMATION: Explain the type of special exception use you are requesting.

COMPLIANCE STATEMENT: Explain how you will meet the requirements of the section allowing the requested special permission.

CONDITION STATEMENT: Explain the conditions, if any, you believe should be imposed if your request should be approved.

SUPPORTING DOCUMENTATION: List addendums, petitions, pictures, etc., that the applicant will be submitting into the record at the meeting or have been included in the application packet.

APPLICANT'S SIGNATURE: The applicant must sign the form certifying the information is correct and must be signed even if applicant is the owner.

OWNER'S SIGNATURE: This section must be signed by the property owner. Notarized written authorization from the property owner giving the applicant permission to act of his/her behalf can be substituted for property owner's signature.

ADDITIONAL INFORMATION

1. THE SPECIAL EXCEPTION WILL BE ADVERTISED IN THE LOCAL NEWSPAPER AND THE PROPERTY WILL BE POSTED INDICATING THE DATE AND TIME OF THE PUBLIC HEARING. PROPERTY OWNERS WITHIN 500 FEET FROM THE BOUNDARY OF THE SUBJECT PARCEL OR PARCELS OR A MINIMUM OF 30 PARCELS, WHICHEVER IS GREATER, WILL BE NOTIFIED OF THE REQUEST, DATE, AND TIME OF THE PUBLIC HEARING VIA REGULAR MAIL.
2. THE APPLICATION FILING DEADLINE IS THE FIRST WEDNESDAY OF EACH MONTH (PENDING HOLIDAYS). THE BOARD OF ZONING APPEALS WILL HEAR THE REQUEST THE SECOND THURSDAY OF THE FOLLOWING MONTH. CONCEPTUAL SITE PLAN APPROVAL FOR THE SPECIAL EXCEPTION MUST BE OBTAINED BY STAFF PRIOR TO SUBMITTAL OF THE SPECIAL EXCEPTION APPLICATION. BASED ON THE PROPOSED USE, A TRAFFIC IMPACT ANALYSIS (TIA) MAY BE REQUIRED AND MUST BE SUBMITTED PRIOR TO ACCEPTING THE SPECIAL EXCEPTION APPLICATION AND APPROVED PRIOR TO PRESENTING THE REQUEST TO THE BOARD OF ZONING APPEALS.
3. THE BOARD OF ZONING APPEALS MAY ELECT TO APPROVE, APPROVE WITH CONDITIONS, OR DENY A SPECIAL EXCEPTION BASED ON THE HEARING AND PROBABLE IMPACT OF SUCH USES ON CONTIGUOUS USES AND CONDITIONS.
4. FOUR OF THE SEVEN APPOINTED BOARD MEMBERS MUST BE PRESENT BEFORE ACTION CAN BE TAKEN ON A SPECIAL EXCEPTION, AND THE CONCURRING VOTE OF THE MAJORITY OF THE BOARD OF ZONING APPEALS PRESENT IS NECESSARY IN ORDER FOR A SPECIAL EXCEPTION TO BE APPROVED.

5. THE APPLICANT MAY PRESENT, PER DISCRETION OF THE BOARD OF ZONING APPEALS CHAIRPERSON, ANY ITEMS AND/OR INDIVIDUALS HE/SHE BELIEVES WILL HELP HIS/HER CASE.
6. NO SPECIAL EXCEPTION, HAVING BEEN DENIED, SHALL BE RESUBMITTED TO THE BOARD FOR A PERIOD OF ONE (1) YEAR, UNLESS CONDITIONS HAVE CHANGED SUBSTANTIALLY, AND THE BOARD VOTES UNANIMOUSLY TO REHEAR THE MATTER.
7. ANY PERSON WHO MAY HAVE A SUBSTANTIAL INTEREST IN ANY DECISION OF THE ZONING BOARD OF APPEALS MAY APPEAL FROM ANY DECISION OF THE BOARD TO CIRCUIT COURT, FILING WITH THE CLERK OF SUCH COURT A PETITION IN WRITING SETTING FORTH PLAINLY, FULLY AND DISTINCTLY WHEREIN THE DECISION IS CONTRARY TO LAW. THE APPEAL MUST BE FILED WITHIN 30 DAYS AFTER THE DECISION OF THE BOARD IS MAILED. ALL FINAL DECISIONS OR ORDERS OF THE BOARD WILL BE DELIVERED TO PARTIES OF INTEREST BY CERTIFIED MAIL.

IF FURTHER ASSISTANCE IS NEEDED, PLEASE CALL (803) 909-7278.

BOARD OF ZONING APPEALS SPECIAL EXCEPTION APPLICATION

GENERAL INFORMATION

APPLICANT'S NAME: _____

EMAIL ADDRESS: _____

ADDRESS: _____

NUMBER

STREET

APARTMENT/BOX NUMBER

CITY

STATE

ZIP CODE

PHONE: _____

WORK

HOME

PROPERTY OWNER'S NAME: _____

EMAIL ADDRESS: _____

ADDRESS: _____

NUMBER

STREET

APARTMENT/BOX NUMBER

CITY

STATE

ZIP CODE

PHONE: _____

WORK

HOME

PROPERTY INFORMATION

PROPERTY ADDRESS: _____

PROPERTY DIRECTIONS: _____

PROPERTY CONDITIONS: _____

PROPERTY TAX MAP #: _____

PLAT: PLEASE ATTACH TO APPLICATION

LOT AREA: ACRES: _____

SQ. FEET: _____

ZONING DISTRICT: _____

USE OF PROPERTY: _____

PRELIMINARY SITE ANALYSIS: _____

TIA REQUIRED? _____ (IF NOT, PLEASE EXPLAIN):

1. APPLICANT HEREBY REQUESTS APPROVAL OF THE FOLLOWING SPECIAL EXCEPTION USE BY THE YORK COUNTY BOARD OF ZONING APPEALS AS DESCRIBED BELOW: _____

2. THE APPLICANT WILL MEET THE STANDARDS IN SECTION _____ OF THE ZONING CODE WHICH ARE APPLICABLE TO THE PROPOSED SPECIAL EXCEPTION IN THE FOLLOWING MANNER: _____

3. LIST ANY CONCESSION(S) OR ADDITIONAL CONDITIONS THAT YOU AGREE TO AS PART OF THE APPROVAL: _____

4. IF YOU ARE SUBMITTING ADDITIONAL INFORMATION, PLEASE LIST BELOW:

I CERTIFY THAT ALL INFORMATION PRESENTED BY ME IN THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BENEFIT:

APPLICANT

DATE

I (WE) CERTIFY THAT I (WE) ARE THE OWNERS OF THE PROPERTY INVOLVED IN THIS APPLICATION AND FURTHER THAT I (WE) DESIGNATE THE PERSON SIGNING AS APPLICANT TO REPRESENT ME (US) IN THIS APPLICATION.

PROPERTY OWNER (S)

DATE

***ATTACHED OWNER'S NOTARIZED WRITTEN AUTHORIZATION IF OWNER'S SIGNATURE CANNOT BE OBTAINED.**

OFFICE USE ONLY

AMOUNT PAID: _____ **CHECK #:** _____

CASH AMOUNT: _____

DATE RECEIVED: _____

RECEIPT NUMBER: _____

DATE FILED: _____

MEETING DATE: _____

ACCEPTED BY:

STAFF SIGNATURE

DATE

Upon completion of your Application, sign the statement below, and return it along with your application by the due date. A copy of this acknowledgment will be attached with your application for our records.

I, _____, have signed that I am aware of the Board of Zoning Appeals hearing date.

(Hearing Date)

I understand that I will be asked to speak on behalf of my request and that I, or a representative will need to be in attendance. If for some reason I or a representative will not be able to attend the scheduled meeting, I must request a deferral to another date, or withdraw my application, if I do not want my application considered by the Board of Zoning Appeals.

I acknowledge that failure to attend the meeting does not result in my application being automatically deferred to the next month. The Board of Zoning Appeals will still hold the hearing on my request and can take any form of action, including denial.

Should my request be denied, I will not be permitted to resubmit the request to the Board of Zoning Appeals for a period of one year, unless conditions have changed substantially and the Board of Zoning Appeals votes unanimously to rehear the matter.

(Property owner's signature)

(Date)

(Applicant's signature)

(Date)

(Staff's signature)

(Date)