



City of Margate  
BOARD OF ADJUSTMENT

Application for Variance

901 NW 66th Avenue, Margate, FL 33063  
For Planning & Zoning Questions: 954-979-6213

*OFFICE USE ONLY*

BA #: \_\_\_\_\_

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

**PART I. TO BE COMPLETED BY APPLICANT**

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

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

Name of Agent: \_\_\_\_\_

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

Address of Agent: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Address of Property Owner: \_\_\_\_\_

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

**PART II. PROPERTY INFORMATION:**

Address of Property: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Lot Size/Area: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Folio #: \_\_\_\_\_

Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

**PART III. APPLICATION REQUIRMENTS:** Please submit the following to the Development Services Department:

- 1) Variance application form with Part I - Part IV completed and signed.
- 2) Legal survey with embossed seal, (1 original, stamped/sealed + 2 copies\*) and 1 electronic copy in pdf format.
- 3) Layout or plan showing proposed changes; such as location of fence, building, etc. (3 paper copies and 1 electronic copy in pdf format required).
- 4) PROPERTY OWNER CERTIFICATION AND PERMISSION TO PROCEED form must be completed
- 5) Cash or Check in the amount of \$200.00 payable to: CITY OF MARGATE.
- 6) Public hearing sign bond agreement and cash or check in the amount of \$150.00 payable to: CITY OF MARGATE

**PUBLIC HEARING NOTICES:**

**Per Section 31-55, at least 14 days prior to a scheduled hearing, the petitioner is responsible for mailing public notice to all property owners within 1,500 feet and posting public hearing signs on the property.**

Proof of mailing and affidavit must be submitted at least 10 days prior to the scheduled hearing.

**ATTENDEANCE AT HEARING IS MANDATORY FOR THE PETITIONER**

**FEE SCHEDULE:**

Variance Request: \$200.00

Sign Bond: \$150.00

Reimburse City for Newspaper Ad

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**PART IV. VARIANCE:**

*The process for requesting a variance is documented in Section 2-80 of the Margate Code of Ordinances.*

**Indicate the specific code a variance is requested from and summarize the context:**

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The following questions must be answered to demonstrate the foundation for the variance request as specifically required by Section 2-78 of the Code of Ordinances. As the applicant, you bear the burden of proving the variance criteria:

**1) What special conditions and circumstances exist which, if there is a literal and strict enforcement of the provisions of a zoning ordinance, would constitute a hardship or practical difficulty in the use of the property involved?**

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**2) How will granting the variance not be contrary to the public interest or the general purpose sought to be accomplished by the zoning ordinances?**

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**3) What circumstances and conditions constitute the hardship or practical difficulties upon which the variance is based?**

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**PART V. TO BE COMPLETED AFTER BOARD OF ADJUSTMENT ACTION. Board Action:**

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Tabled to: \_\_\_\_\_

List Any Special Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Chairman of the Board of Adjustment

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary of the Board of Adjustment

\_\_\_\_\_  
Date

If you would like this document in an alternate format, please call (954) 979-6213 or email [dsd@margatefl.com](mailto:dsd@margatefl.com)



**PROPERTY OWNER CERTIFICATION AND PERMISSION TO PROCEED**

I hereby certify that I am the owner of the property located at \_\_\_\_\_,  
being the subject property for this application for a variance and I give authorization  
to \_\_\_\_\_ to file this petition. I understand that I, or a  
representative on my behalf, must be present at the BOA meeting. If my variance application is denied, I  
understand that I may file an appeal within 7 days via the city clerk's office. .

\_\_\_\_\_  
Print Property Owner's name

\_\_\_\_\_  
Signature of Property Owner

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization,  
this \_\_\_\_ day of \_\_\_\_\_, \_\_ (year), by \_\_\_\_\_ (name of person making statement).

\_\_\_\_\_  
Print or type name of Notary

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_ Personally known to me

\_\_\_\_\_ Produced identification \_\_\_\_\_



# MARGATE

## PUBLIC HEARING SIGN REMOVAL BOND AGREEMENT

I, \_\_\_\_\_, petitioner of record and on behalf of the property owner, hereby agree that the subject public hearing sign shall be removed within two (2) business days following a final determination by the governing body. Further, it is understood that by complying with this section, the \$150 cash bond will be returned to the petitioner of record.

If said public hearing sign is not removed in two (2) business days, I hereby authorize the administration of the City of Margate to remove said sign, billing the costs of the removal of the sign to the owner of the property.

I understand that the \$150 cash bond shall be forfeited and applied against the cost of removal to the City of Margate if said public hearing sign is not removed in two (2) business days.

\_\_\_\_\_

Business Name

\_\_\_\_\_

Street location

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

|  |              |
|--|--------------|
| OFFICE USE ONLY  |              |
| Date of Decision:  | _____        |
| Tabled to date certain:  | _____        |
| Two Business Days (after decision):                                | _____        |
| COMPLIED:  | Yes___ No___ |
| If YES, initiate check request to Finance<br>(601- 0000-220.18-00) |              |
| If NO, inform Finance to deposit Bond<br>(001-0000-369.90-01)      |              |

Copy to Petitioner, Finance Department  
Original to File

**Phone: (954) 979-6213**  
**www.margatefl.com**