

CITY OF MUNCIE

**300 N. High St.
Muncie, Indiana 47305**

BUILDING COMMISSIONER, CITY OF MUNCIE

PROOF OF NONCONFORMITY

(This form is to be filed by any individual, group or corporation desiring to obtain a certificate of nonconformity from administrative zoning officials.)

JURISDICTION No. _____

_____ **Delaware County** **Date Filed** _____

_____ **City of Muncie** **By Whom** _____

OWNER: _____ **PHONE:** _____

ADDRESS: _____

LEGAL DESCRIPTION OF PROPERTY:

RECORD OF OWNERSHIP:

DEED BOOK _____ **DATE** _____ **PURCHASE DATE** _____

PREVIOUS OWNER _____

COMMON ADDRESS OF PROPERTY: _____

NAME AND ADDRESS OF ADJOINING PROPERTY OWNERS:

PRESENT ZONING OF PROPERTY _____

PRESENT PRINCIPAL USE OF PROPERTY _____

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The applicant is required to submit with this application a map of the premises showing exact dimensions of the land and all buildings existing on the land and the uses of all buildings. Particular emphasis should be placed on delineating the precise area occupied by the nonconforming use and dimensions of the area. The applicant is also required to submit documentary evidence such as vouchers, photographs, photo static copies of deeds or rulings affecting the property, written testimony of adjoining property owners confirming legal existence of the nonconforming use or similar proof.

WHAT TYPE OF NONCONFORMING USE IS PRESENTLY BEING CARRIED OUT ON THE PREMISES?

HOW MUCH AREA OF THE PREMISES IS BEING USED FOR THE NONCONFORMING USE?

HOW LONG HAS THE NONCONFORMING USE EXISTED ON THE PREMISES?
(Give Accurate Estimate)

HAS THE NONCONFORMING USE EVER BEEN DISCONTINUED? FOR HOW LONG?

HAS THE NONCONFORMING USE EVER BEEN CHANGED? (Give previous nonconforming uses)

HAS THE PREMISES EVER BEEN REZONED? If answer is yes, give dates when rezoning occurred.

HAS AN APPLICATION FOR REZONING EVER BEEN FILED AND ACTED UPON UNFAVORABLY BY EITHER THE PLAN COMMISSION OR THE LEGISLATIVE BODIES? If answer is yes, state the date of application and nature.

HAS THE OWNER APPLIED AND OBTAINED ANY VARIANCE OR SPECIAL USE GRANT FROM THE BOARD OF ZONING APPEALS TO OPERATE THE NONCONFORMING USE? If answer is yes, give date and details.

HAS THE OWNER EVER OBTAINED A BUILDING PERMIT OR ZONING CERTIFICATE TO ESTABLISH, ENLARGE OR CHANGE THE NATURE OF THE NONCONFORMING USE? If answer is yes, give permit number, official issuing of such permit or certificate, purpose and date of the permit, and nature of the permit.

PROOF OF NONCORMITY

DURING WHAT HOURS IS THE NONCONFORMING USE OPERATED? HOW MUCH TRAFFIC, BOTH AUTO AND TRUCK TRAFFIC, IS CONNECTED WITH THE NONCONFORMING USE?

ARE PARKING FACILITIES AVAILABLE? DESCRIBE SUCH FACILITIES.

HOW MUCH NOISE AND DUST IS GENERATED BY THE NONCORMING USE?

HAS THERE EVER BEEN A COMPLAINT OR COMPLAINTS FROM ADJOINING AND/OR SURROUNDING PROPERTY OWNERS CONCERNING THE NONCONFORMING USE? If answer is yes, give nature of such complaint.

DOES THE PRESENT OWNER INTEND TO CONTINUE THE NONCONFORMING USE?

DOES THE PRESENT OWNER INTEND TO SELL THE PROPERTY WITH THE INTENTION THAT THE NEW OWNER AND PURCHASER WILL CONTINUE THE NONCONFORMING USE?

AFFIDAVIT

I, _____, owner of record of the property described in this application, do hereby state that the information herein furnished by me is true and correct to the best of my ability.

Signed: _____

Phone: _____

Mailing Address: _____

NOTARY PUBLIC

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20 ____.

Notary Signature

Print Name

Resident of _____ County

Commission Expires: _____