



Sidewalk Waiver Application

Louisville Metro Planning & Design Services

Case No.: _____ Intake Staff: _____
Date: _____ Fee: _____

Applications are due on Mondays at 2:00 p.m. in order to be processed that week. Once complete, please bring the application and supporting documentation to: Planning and Design Services, located at 444 South 5th Street, Suite 300. For more information, call (502) 574-6230 or visit <http://www.louisvilleky.gov/PlanningDesign>.

Project Information:

Explanation of Waiver: NO SIDEWALK CURRENTLY EXISTS @ 34TH STREET
Primary Project Address: 504 N. 34TH STREET
Additional Address(es): N/A
Primary Parcel ID: 0100007300
Additional Parcel ID(s): N/A

Proposed Use: SINGLE-FAMILY RES. Existing Use: VACANT
Existing Zoning District: R-10 Existing Form District: TRADITIONAL
Deed Book(s) / Page Numbers²: 10523/0179
The subject property contains 0.1547 acres. Number of Adjoining Property Owners: 5

Has the property been the subject of a previous development proposal (e.g., rezoning, variance, appeal, conditional use permit, minor plat, etc.)? *This information can be found in the Land Development Report (Related Cases)*¹ Yes No

If yes, please list the docket/case numbers:

Docket/Case #: 10 DEVPLAN 1004 Docket/Case #: _____
Docket/Case #: _____ Docket/Case #: _____

Sidewalk Waiver Justification:

In order to justify approval of any waiver, the Planning Commission or Board of Zoning Adjustment considers the following criteria. Please answer all of the following questions. Use additional sheets if needed. A response of yes, no, or N/A is not acceptable.

1. How does the proposed waiver conform to the Comprehensive Plan and the intent of the Land Development Code?

HABITAT WANTS TO DEVELOP THIS ~~AND~~ VACANT LOT AND WE ARE ADHERING TO ZONING REGULATIONS. WE WOULD LOVE A CITY/PUBLIC SIDEWALK IN THIS AREA, BUT WE DONT HAVE THE MEANS TO BUILD ONE.

2. Why is compliance with the regulations not appropriate, and will granting of the waiver result in a development more in keeping with the Comprehensive Plan and the overall intent of the Land Development Code?

THERE ARE NO PUBLIC CITY SIDEWALKS ON THIS PROPERTY OR STREET. (34TH STREET)

3. What impacts will granting of the waiver have on adjacent property owners?

WE ARE ADDING A SINGLE-FAMILY HOME TO A CURRENTLY VACANT LOT.

4. Why would strict application of the provision of the regulations deprive you of reasonable use of the land or create an unnecessary hardship for you?

HABITAT WORKS VERY HARD TO DEVELOP AND IMPROVE THE PORTLAND AREA THROUGH HOUSING SOLUTIONS, IF NOT APPROVED A FAMILY WILL LOSE THE OPPORTUNITY TO BE HOME OWNERS. HABITAT DOES NOT HAVE THE MEANS NECESSARY TO BUILD AND ENTIRE CITY/PUBLIC SIDEWALK.

Contact Information:

Owner: Check if primary contact

Applicant: Check if primary contact

Name: KELSEY BIAUQUE

Name: _____

Company: HABITAT FOR HUMANITY - LOU

Company: _____

Address: 1020 BANK STREET

Address: _____

City: LOU State: KY Zip: 40203

City: _____ State: _____ Zip: _____

Primary Phone: (828) 778 5704

Primary Phone: _____

Alternate Phone: (502) 805-1408

Alternate Phone: _____

Email: KBLAUQUE@LOUISVILLEHABITAT.ORG

Owner Signature (required): [Signature]

Attorney: Check if primary contact

Plan prepared by: Check if primary contact

Name: _____

Name: _____

Company: _____

Company: _____

Address: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____

Primary Phone: _____

Alternate Phone: _____

Alternate Phone: _____

Email: _____

Email: _____

Certification Statement: A certification statement **must be submitted** with any application in which the owner(s) of the subject property is (are) a limited liability company, corporation, partnership, association, trustee, etc., or if someone other than the owner(s) of record sign(s) the application.

I, KELSEY BIAUQUE, in my capacity as REPRESENTATIVE, hereby
representative/authorized agent/other

certify that HABITAT FOR HUMANITY - LOU is (are) the owner(s) of the property which
name of LLC / corporation / partnership / association / etc.

is the subject of this application and that I am authorized to sign this application on behalf of the owner(s).

Signature: [Signature] Date: 1/27/2010

I understand that knowingly providing false information on this application may result in any action taken hereon being declared null and void. I further understand that pursuant to KRS 523.010, et seq. knowingly making a material false statement, or otherwise providing false information with the intent to mislead a public servant in the performance of his/her duty is punishable as a Class B misdemeanor.