

Docket/Case #: _____ Docket/Case #: _____
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General Waiver Justification:

In order to justify approval of any waiver, the Planning Commission or Board of Zoning Adjustment considers four 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. Will the waiver adversely affect adjacent property owners?

No, none of the properties are actual residences, and the sign will not be visible to most adjacent properties due to nearby foliage. The sign is also equipped with an ambient light sensor which will dim the light from dusk till dawn, reducing light pollution.

2. Will the waiver violate the Comprehensive Plan?

The waiver will not violate the Comprehensive Plan. Class Act FCU will use their sign to communicate with the surrounding community, which is a foundation of the Comprehensive Plan.

3. Is extent of waiver of the regulation the minimum necessary to afford relief to the applicant?

Yes, granting the waiver will allow the sign to be installed at a site that is less than 300 ft from a property that is zoned residential.

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4. Has either (a) the applicant incorporated other design measures that exceed the minimums of the district and compensate for non-compliance with the requirements to be waived (net beneficial effect) or would (b) the strict application of the provisions of the regulation deprive the applicant of the reasonable use of the land or would create an unnecessary hardship on the applicant?

We have taken into account the other sign requirements and created a proposal that meets or exceeds the minimums of the district. The proposed area and height of the sign meet the LDC's requirements.

Contact Information:

Owner: Check if primary contact

Applicant: Check if primary contact

Name: CLASSROOM, TEACHERS FEDERAL CREDI

Name: Heather Mullin

Company: CLASSROOM, TEACHERS FEDERAL CREDI

Company: Golden Rule Signs

Address: 3620 Fern Valley Road

Address: 1083 Brooks Industrial Rd.

City: Louisville State: KY Zip: 40219

City: Shelbyville State: KY Zip: 40065

Primary Phone: 502.212.3149

Primary Phone: 502-416-1999

Alternate Phone: _____

Alternate Phone: _____

Email: tanonson@classact.org

Email: heather@goldenrulesigns.com

Owner Signature (required): _____

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: _____

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