



CITY OF COLLINSVILLE ~ DEPARTMENT OF COMMUNITY DEVELOPMENT  
 125 SOUTH CENTER STREET; COLLINSVILLE, ILLINOIS 62234  
 TEL: 618.346.5200, EXT. 1143  
 WEB: [WWW.COLLINSVILLEIL.ORG](http://WWW.COLLINSVILLEIL.ORG)

**APPLICATION FOR APPEAL OR VARIANCE**

*The Zoning Hearing Officer is appointed by the Mayor with the approval of the City Council. The Hearing Officer's responsibility is to hear appeals from decisions of the City of Collinsville Department of Community Development, to consider requests for variances, and to hear and decide all other matters referred to it by the City Council or upon which it is required to pass under applicable ordinances. A variance is an approved departure from the provisions of the zoning ordinance for a specific parcel, without changing the Zoning Ordinance. The variance requested arises from such condition which is unique to the property in question and which is not ordinarily found in the same zone or district, and is not created by an action or actions of the property owner or applicant.*

**I. APPLICANT INFORMATION**

Property Address: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Owner of Premises: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Applicant/Agent: \_\_\_\_\_  
(If other than owner of premises)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**II. REQUEST TYPE**

I hereby appeal the decision of the Director of Community Development or other official contained in the document attached hereto, and:

Check (v) as applicable

- Allege there is an error in such decision.
- Request a variance from the requirements of the ordinance upon which such decision is based.

**III. AUTHORIZATION/DECLARATION**

I, \_\_\_\_\_, owner in fee or agent authorized to apply for this  
(PRINT NAME)

variance or appeal, declare under penalties of perjury that this application has been examined by me, and to the best of my knowledge and belief is true, correct, and complete. By signing this application, I grant the City of Collinsville access to post a Notice of Public Hearing sign at the above referenced property. **APPLICATION WILL NOT BE ACCEPTED WITHOUT SIGNATURE OF LEGAL OWNER OR AUTHORIZED APPLICANT/AGENT.**

Owner/Agent: \_\_\_\_\_ Date: \_\_\_\_\_  
(SIGN NAME)

#### IV. SUBMITTAL REQUIREMENTS

1. Completed Application;
2. Copy of decision or order, if any, on which the application is based;
3. A written statement of the principal points on which the application is being made shall include, but not be limited to, the following:
  - a. For appeals alleging an error in decision
    - i. Details of the specific error believed to have been made; and
    - ii. Citations of the specific reasons supporting such belief, including any references to ordinances, statutes, or court decisions.
  - b. For a request for a variance
    - i. Citation of the applicable sections of the Sign Code, Building Code, Zoning Code or other sections of the City of Collinsville Code of Ordinances, and detail of the variation being sought;
    - ii. Demonstration that the variance requested arises from such condition which is unique to the property in question and which is not ordinarily found in the same zone or district, and is not created by an action or actions of the property owner or applicant;
    - iii. Demonstration that the granting of the permit for the variance will not adversely affect the rights of adjacent property owners represented in the application;
    - iv. Demonstration that the strict application of the provisions of the Zoning Regulations of which the variance is requested will constitute unnecessary hardship upon the property owner represented in the application;
    - v. Demonstration that the variance desired will not adversely affect the public health, safety, morals, order, convenience, prosperity, or general welfare; and
    - vi. Demonstration that the granting of the variance desired will not be opposed to the general spirit and intent of the Zoning Regulations.
4. Four (4) "hard copy" sets of any evidence to support the application including, but not limited to, architectural elevations, site plans, area maps, floor plans, photographs, and letters of support from adjacent property owners. Other evidentiary requirements may be imposed by the Director of Community Development to ensure the Hearing Officer fully understands the nature and impact of the request. Electronic versions of evidence in Adobe PDF, JPG, GIF, or Microsoft Office formats will be accepted in lieu of print copies. Site plans shall be no larger than 24" x 36. All other evidence shall be limited to letter, legal, or ledger size format.
5. List of property owners within 250 feet and their mailing addresses. This information may be obtained from the Collinsville Township Tax Assessor's Office, phone 618-345-0051, or from St. Clair County, phone 618-277-6600.
6. Application fees: \$250.00 for the first variance or other action and \$100.00 for each additional variance or other action considered at the same hearing.

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*The Hearing Officer shall fix a reasonable time for the hearing, you will be notified by certified mail, surrounding property owners will be notified, and notice published. The Hearing Officer will consider the request after hearing from interested parties during the hearing, and make a determination within a reasonable amount of time. If approved, the variance will be issued after a mandatory 15-day appeals period has passed.*