VARIANCE REQUEST APPLICATION

City of Jackson, Missouri

APPLICATION DATE: October 22, 2024

PROPERTY ADDRESS (Other description of location if not addressed):

533 Morgan St.
Jackson, MO. 63755

CURRENT PROPERTY OWNERS (all legal property owners as listed on current deed, including trusts, LLCs, etc):

Property Owner Name(s): Travis & Trisha Sikes

Mailing Address: 533 Morgan St.

City, State ZIP: Jackson, Mo. 63755

PROPOSED PROPERTY OWNERS (if property is to be transferred, name(s) in which property will be deeded):

Proposed Property Owner(s): _____

Mailing Address: _____

City, State, ZIP _____

CONTACT PERSON HANDLING APPLICATION:

Contact Name: Travis Sikes

Mailing Address: 533 Morgan St.

City, State ZIP Jackson Mo. 63755

Contact's Phone: 573-270-9951

Email Address (if used): dettsikes@yahoo.com

CURRENT ZONING: (check all that apply)

- [x] R-1 (Single-Family Residential)
- [ ] R-2 (Single-Family Residential)
- [ ] R-3 (One- And Two-Family Residential)
- [ ] R-4 (General Residential)
- [ ] MH-1 (Mobile Home Park)
- [ ] O-1 (Professional Office)
- [ ] CO-1 (Enhanced Commercial Overlay)
- [ ] C-1 (Local Commercial)
- [ ] C-2 (General Commercial)
- [ ] C-3 (Central Business)
- [ ] C-4 (Planned Commercial)
- [ ] I-1 (Light Industrial)
- [ ] I-2 (Heavy Industrial)
- [ ] I-3 (Planned Industrial Park)

CURRENT USE OF PROPERTY: Current residence

PROPOSED USE OF PROPERTY: SAA

LEGAL DESCRIPTION OF TRACT (attach a copy of the most current property deed):

REASON FOR REQUEST: State the reason(s) why you believe the requested variance is necessary and compliance with the zoning code creates an undue hardship that denies all beneficial use of the property. Undue hardship must be related to condition of the property, not a condition of the owner or to a financial consideration. Attach additional page(s) as needed.

Requesting to move my 6' privacy fence back to the property line off Harrison Drive, which is located to my west.

DRAWINGS: Attach a scaled plat of the tract(s) showing the entire lot, the location and size of all buildings / structures on the lot. If any buildings are to be less than the standard minimum setbacks, include these distances on the drawing. Any approved special use permit will be based on this building layout. Changes to the layout will require a new special use permit.

SURROUNDING PROPERTY OWNERS: A map of the property location and a map and list of all owners of property within 185' of the property in question will be incorporated as part of this application by the City. The 185' distance is exclusive of rights-of-way. The City will prepare this map based on the most current tax information published by the Cape Girardeau County Assessor.

PRIOR VARIANCE HISTORY:

Have there been any prior applications for Board of Adjustment action for this property? If so, please include the date of previous application. YES ☐ NO ☒ Date: _____

Prior Variance Approved? YES ☐ NO ☒

Description of prior variance request: _____

SITE PLAN:

Attach a site plan of the property in question. The site plan does not need to be prepared by a surveyor, but must be adequate to clearly show the following information. This site plan must include the proposed construction, all existing structures on the property, all streets, alleys, easements, property lines, etc. Please include dimensions (measurements) of all structures and measurements from the structure in question to other structures and to all property lines. For a height variance, also include the proposed height from the lowest adjacent grade and highest adjacent grade. Show the location of all unusual physical features of the property that pertain to the problem. Measurements for the distance, setback, height, or size to be varied must be accurate. Construction cannot exceed the varied distance, size, or height approved by the Board of Adjustment.

PHOTOS:

Include photos of the property if they help explain the problem and/or reason for the need for a variance.

PERMISSION TO VISIT PROPERTY:

The owner hereby gives permission for members of the Board of Adjustment and/or city staff to enter within the boundaries of the real estate listed herein to examine the location(s) and property conditions involved in the proposed variance.

Yes ☒ No ☐

OWNER SIGNATURES:

I state upon my oath that all of the information contained in this application is true. *(Signatures of all persons listed on the current property deed and the authorized signer(s) for any owning corporation or trust.)*

Travis Sikes

Trisha Sikes

Please submit this application along with $50.00 non-refundable application fee to:

Building & Planning Manager
City of Jackson
101 Court Street
Jackson, MO 63755
573-243-2300 ext.29 (ph)
573-243-3322 (fax)
permits @jacksonmo.org