

**SEMINOLE COUNTY GOVERNMENT
BOARD OF ADJUSTMENT
AGENDA MEMORANDUM**

SUBJECT: 2461 Center Street – Walter Lewis Martin, applicant; Request for a rear yard setback variance from 20 feet to 7 feet for a proposed addition in R-1 (Single Family Dwelling District).

DEPARTMENT: Planning & Development **DIVISION:** Planning

AUTHORIZED BY: Kathy Fall **CONTACT:** Denny Gibbs **EXT.** 7387

Agenda Date 1/28/08 **Regular** **Consent** **Public Hearing – 6:00**

MOTION/RECOMMENDATION:

1. **Deny** the request for a rear yard setback variance from 20 feet to 7 feet for a proposed addition in R-1 (Single Family Dwelling District); or
2. **Approve** the request for a rear yard setback variance from 20 feet to 7 feet for a proposed addition in R-1 (Single Family Dwelling District); or
3. **Continue** the request to a time and date certain.

GENERAL INFORMATION	Applicant: Walter Lewis Martin Owner: Lizzie M Williams Location: 2461 Center Street Zoning: R-1 (Single Family Dwelling District) Subdivision: Midway
BACKGROUND / REQUEST	<ul style="list-style-type: none"> • On 1/28/08 a rear yard variance was granted from 30 feet to 20 feet. Subsequently, the applicant realized that, due to errors in the site plan, the granted variance was not adequate. • The applicant is requesting a rear yard setback variance from 20 feet to 7 feet (3' from the property line and 4' for the alley) in order to complete an addition at the rear of the single family residence. • There are currently no code enforcement or building violations for this property.

STAFF FINDINGS	<p>The applicant has not satisfied the criteria for the grant of a variance. Staff has determined that:</p> <ul style="list-style-type: none">• No special conditions or circumstances exist, which are peculiar to the land, structure, or building involved and which are not applicable to other lands, structures or building in the same zoning district.• Special conditions and circumstances result from the actions of the applicant.• The granting of the variance requested would confer on the applicant special privileges that are denied by Chapter 30 to other lands, buildings, or structures in the same zoning district.• The literal interpretation of the provisions of Chapter 30 would not deprive the applicant of rights commonly enjoyed by other properties in the same zoning classification.• The variance requested is not the minimum variance that will make possible reasonable use of the land, building or structure.• The applicant would still retain reasonable use of the land, building or structure without the granting of the variance.• The grant of the variance would not be in harmony with the general intent of Chapter 30.
STAFF RECOMMENDATION	<p>Based on the stated findings, staff recommends denial of the request, unless the applicants can demonstrate a hardship. If the Board should decide to grant a variance, staff recommends the following conditions of approval:</p> <ul style="list-style-type: none">• Any variance granted shall apply only to the addition as depicted on the attached site plan; and• Any additional condition(s) deemed appropriate by the Board, based on information presented at the public hearing.

INDEX OF ATTACHMENTS

Items that are checked are included in the packet

- Staff Report
- Application
- Applicant statement of request
- Proposed Site Plan
- Location map
- Property Appraiser data sheet
- PUD Commitment Card, *if applicable*

Support information:

- Proposed elevation drawings, renderings, floor plans, etc
- Aerials, *if warranted*
- Plat, *if warranted*
- Code Enforcement information
- Building Permit information
- Correspondence
- Authorization letter
- Applicant Authorization Form
- Supporting documentation
- Letters of support
- HOA approval letter
- Pictures provided by applicant
- Other miscellaneous documents

- Proposed Development Order

Fee: \$150.00 plus \$50.00 for each additional variance

Application # BV2008-12
Meeting Date 2-25-08



COPY

VARIANCE APPLICATION

SEMINOLE COUNTY PLANNING DIVISION

1101 East First Street Sanford FL 32771 (407) 665-7444

PROPERTY OWNER / APPLICANT (If you are not the owner please provide a letter of authorization from the owner)

Name: WALTER LEWIS MARTIN
Address: 2461 Center St. City: SANFORD Zip code: 32771
Project Address: _____ City: _____ Zip code: _____
Contact number(s): (321) 202-1521 (407) 268-4554
Email address: _____

Is the property available for inspection without an appointment? Yes No

What type of structure is this request for?	
<input type="checkbox"/> Shed	Please describe:
<input type="checkbox"/> Fence	Please describe:
<input type="checkbox"/> Pool	Please describe:
<input type="checkbox"/> Pool screen enclosure	Please describe:
<input checked="" type="checkbox"/> Addition	Please describe: <u>Bedroom Addition</u>
<input type="checkbox"/> New Single Family Home	Please describe:
<input type="checkbox"/> Other	Please describe:
<input type="checkbox"/> This request is for a structure that has already been built.	

RECEIVED FEB 01 2008

3' TO PROPERTY LINE + 4' OF ALLEY

What type of variance is this request?				
<input type="checkbox"/> Minimum lot size	Required lot size:		Actual lot size:	
<input type="checkbox"/> Width at the building line	Required lot width:		Actual lot width:	
<input type="checkbox"/> Front yard setback	Required setback:		Proposed setback:	
<input checked="" type="checkbox"/> Rear yard setback	Required setback:	<u>20ft.</u>	Proposed setback:	<u>7ft.</u>
<input type="checkbox"/> Side yard setback	Required setback:		Proposed setback:	
<input type="checkbox"/> Side street setback	Required setback:		Proposed setback:	
<input type="checkbox"/> Fence height	Required height:		Proposed height:	
<input type="checkbox"/> Building height	Required height:		Proposed height:	
Use below for additional yard setback variance requests:				
<input type="checkbox"/> _____ yard setback	Required setback:		Proposed setback:	
<input type="checkbox"/> _____ yard setback	Required setback:		Proposed setback:	
<input checked="" type="checkbox"/> Total number of variances requested <u>1</u>				

APPLICATION WILL BE ACCEPTED AND/OR SCHEDULED unless all of the information in the Variance application and submittal checklist are provided to the planning division.

Signed: _____

FOR OFFICE USE ONLY

Date Submitted: 2-1-09 Reviewed By: P. Johnson
 Tax parcel number: 32-19-31-513-0000-2470 Zoning/FLU R-1/LOR
 Legally created parcel (1971 tax roll, 5-acre dev, lot split)
 Platted Lot (check easements as shown on lots, in notes or in dedication)
 Lot size _____ Meets minimum size and width
 Application and checklist complete
 Notes: _____

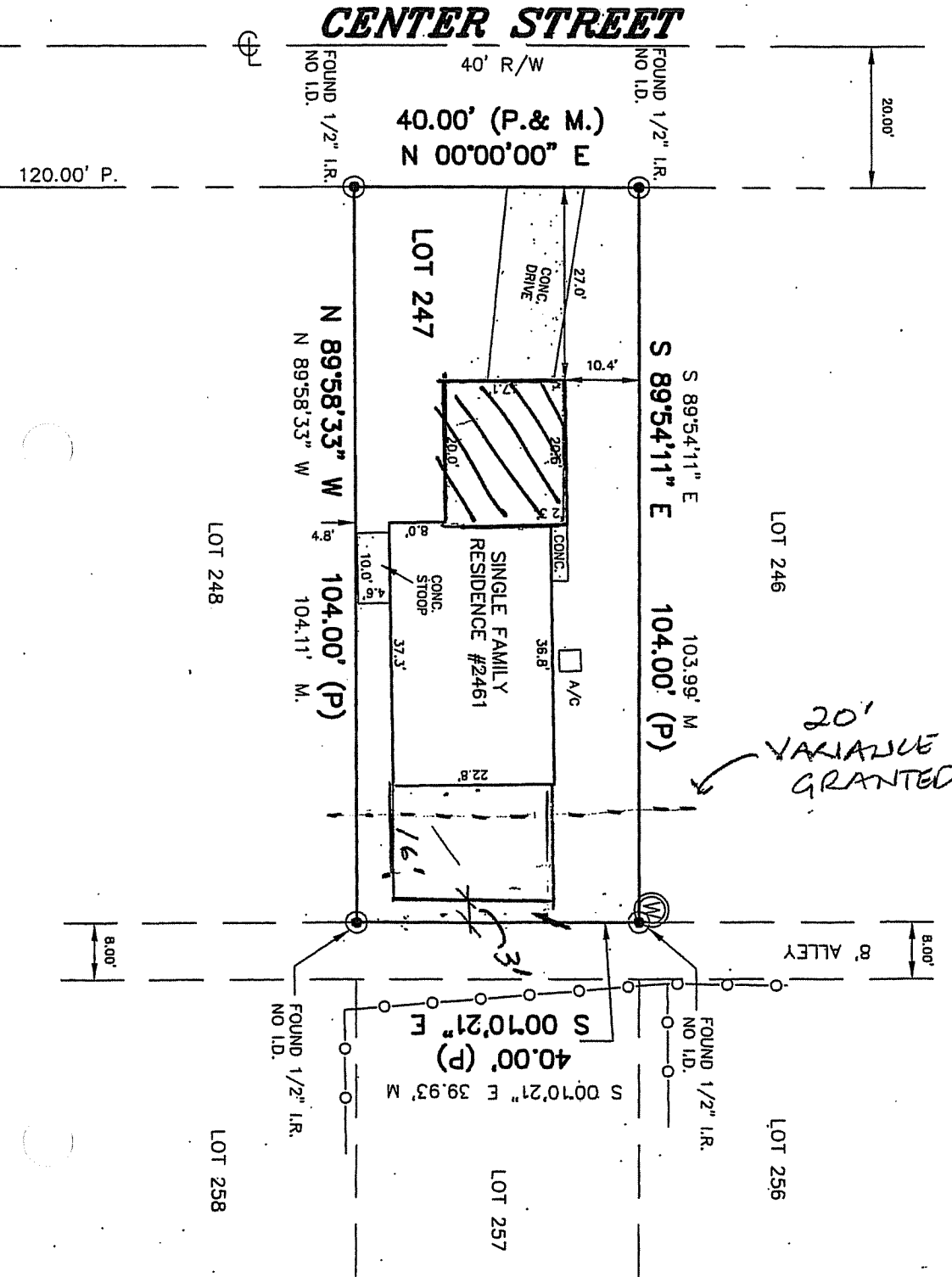
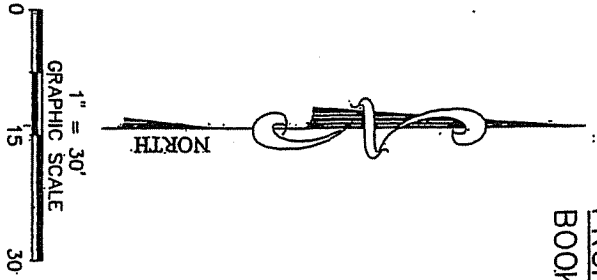
VARIANCE SUBMITTAL CHECKLIST

Please return this checklist with your application!

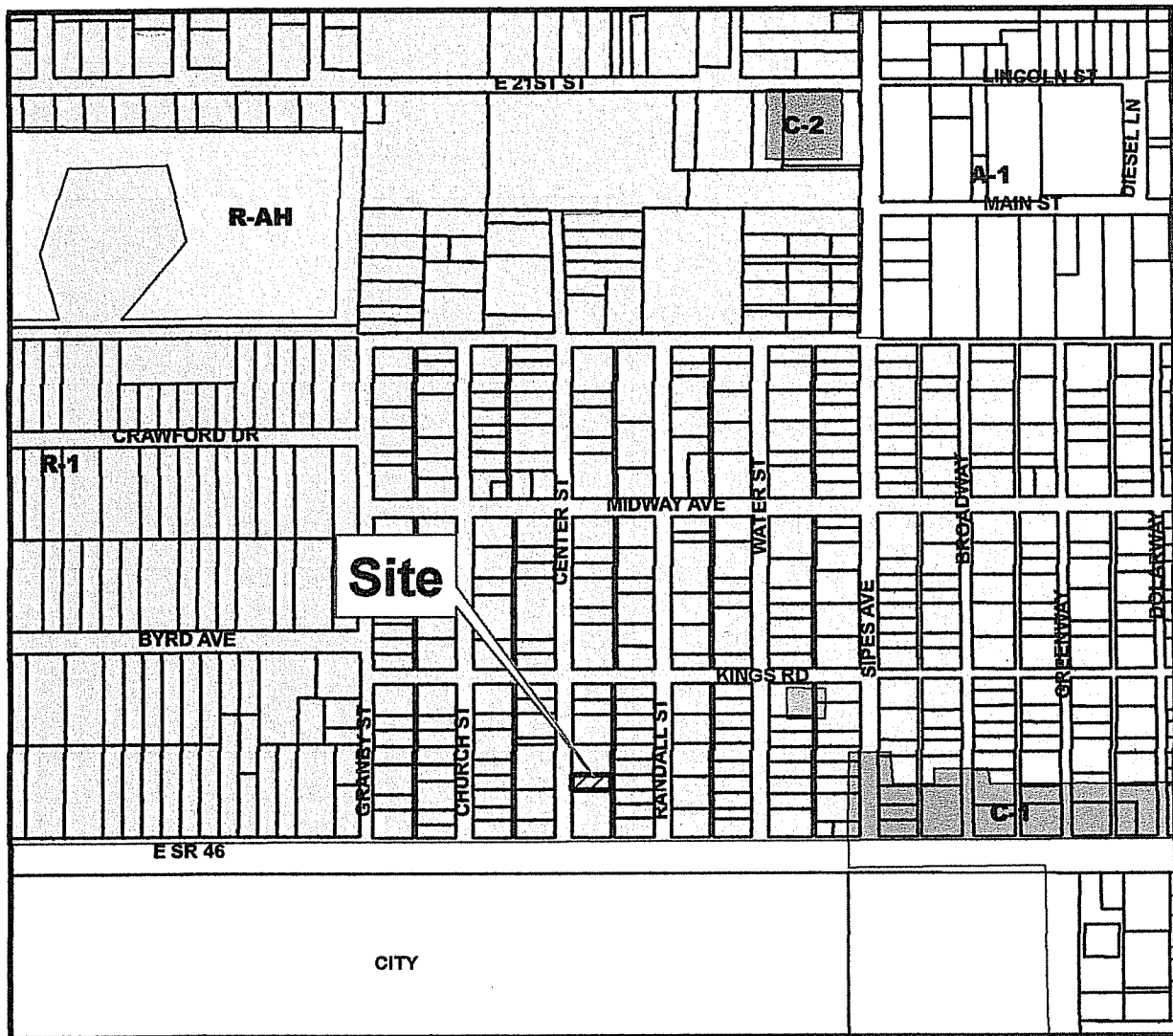
<p><i>After the application is reviewed by staff for completeness, any items required that were not provided at the time of the application will be check marked below. These must be provided prior to scheduling of the Board of Adjustment hearing.</i></p>	
	1. Completed application.
	2. Owner's authorization letter (if needed). <i>This form can be obtained at http://www.seminolecountyfl.gov/pd/planning/forms.asp</i>
	3. Provide a legible 8 ½ x 11 inch site plan with the following information NOTE: Please use your property survey for your site plan, if available. See the attached site plan as an example of the information needed; please draw to scale and note the scale used on the plan.
	o Please start with a clean survey (ex: white out old approval stamps)
	o Size and dimension of the parcel
	o Location and name of all abutting streets
	o Location of driveways.
	o Location, size and type of any septic systems, drainfield and wells
	o Location of all easements
	o Existing or proposed house <u>or</u> addition <i>(Label existing, label proposed, and include square footage and dimensions of each)</i>
	o Existing and/or proposed buildings, structures and improvements <i>(Label existing, label proposed, and include square footage and dimension of each)</i>
	o Building height
	o Setbacks from each building to the property lines
	o Location of proposed fence(s)
	o Identification of available utilities <i>(ex: water, sewer, well or septic)</i>
	4. Attach additional information and supporting documents such as letters of support from adjacent property owners or Home Owners Association DRB approvals, as desired.

BOUNDARY SURVEY

PROPERTY DESCRIPTION: LOT 247, MIDWAY, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 1, PAGE(S) 41, OF THE PUBLIC RECORDS OF SEMINOLE COUNTY, FLORIDA.



Walter Lewis Martin
 2461 Center Street
 Sanford, Florida 32771

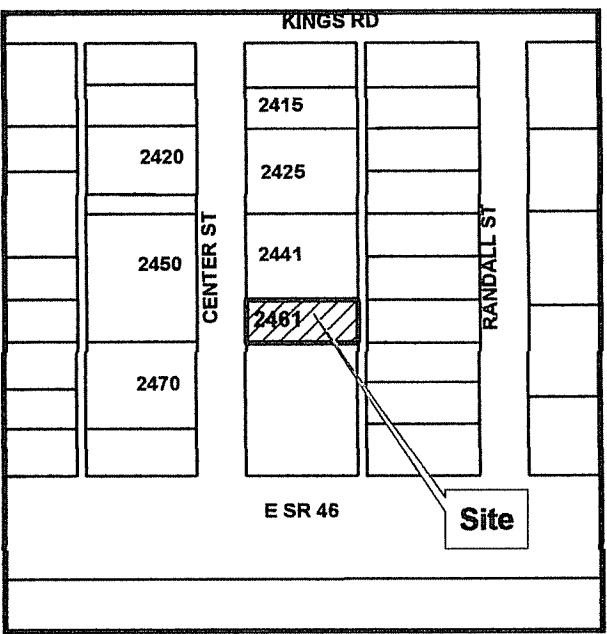


Seminole County Board of Adjustment
 February 25, 2008
 Case: BV2008-12 (Map 3054, Grid B4)
 Parcel No: 32-19-31-513-0000-2470

Zoning

	BV2008-12		R-3		C-2
	A-1		R-AH		
	R-1		C-1		

N



PARCEL DETAIL DAVID JOHNSON, CFA, ASA PROPERTY APPRAISER SEMINOLE COUNTY FL 1101 E. FIRST ST SANFORD, FL 32771-1468 407-665-7508		233 234 235 236 237 238 239 240	241 242 243 244 245 246 247 248 249 250	251 252 253 254 255 256 257 258 259 260	261 262 263 264 265 266 267 268 269 270																																																						
GENERAL Parcel Id: 32-19-31-513-0000-2470 Owner: WILLIAMS LIZZIE M Mailing Address: 2461 CENTER ST City,State,ZipCode: SANFORD FL 32771 Property Address: 2461 CENTER ST SANFORD 32771 Subdivision Name: MIDWAY Tax District: 01-COUNTY-TX DIST 1 Exemptions: 00-HOMESTEAD (2002) Dor: 01-SINGLE FAMILY					2008 WORKING VALUE SUMMARY Value Method: Market Number of Buildings: 1 Depreciated Bldg Value: \$52,510 Depreciated EXFT Value: \$0 Land Value (Market): \$7,560 Land Value Ag: \$0 Just/Market Value: \$60,070 Assessed Value (SOH): \$29,216 Exempt Value: \$25,500 Taxable Value: \$3,716 Tax Estimator Portability Calculator																																																						
SALES Deed Date Book Page Amount Vac/lmp Qualified QUIT CLAIM DEED 04/1998 03451 1404 \$15,900 Improved No Find Comparable Sales within this Subdivision					2007 VALUE SUMMARY Tax Amount(without SOH): \$392 2007 Tax Bill Amount: \$31 Save Our Homes (SOH) Savings: \$361 2007 Taxable Value: \$3,003 DOES NOT INCLUDE NON-AD VALOREM ASSESSMENTS																																																						
LAND <table border="1"> <thead> <tr> <th>Land Assess Method</th> <th>Frontage</th> <th>Depth</th> <th>Land Units</th> <th>Unit Price</th> <th>Land Value</th> </tr> </thead> <tbody> <tr> <td>FRONT FOOT & DEPTH</td> <td>40</td> <td>104</td> <td>.000</td> <td>225.00</td> <td>\$7,560</td> </tr> </tbody> </table>					Land Assess Method	Frontage	Depth	Land Units	Unit Price	Land Value	FRONT FOOT & DEPTH	40	104	.000	225.00	\$7,560	LEGAL DESCRIPTION PLATS: <input type="text" value="Pick..."/> LEG LOT 247 MIDWAY PB 1 PG 41																																										
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I ~~Edith~~ Martin give My son
Walter Lewis Martin permission
to Apply for a Variance Application
on my behalf

Address 2461 center st Sanford FL
32771

Edith A Martin

SEMINOLE COUNTY
APPLICATION & AFFIDAVIT

Ownership Disclosure Form

Please provide the information as requested below in accordance with Ordinance No. 07-_____:

1. List all natural persons who have an ownership interest in the property, which is the subject matter of this petition, by name and address.

Name: Lizze M Williams
Address: 2461 Center St.
Phone #: _____

Name: Elizabeth ^{Martin} ~~Williams~~
Address: 2461 Center St.
Phone #: (407) 314-6159

Name: _____
Address: _____
Phone #: _____

Name: Elizabeth Martin
Address: 3000 E 20th St
Phone #: Home 407-268-4554

(Use additional sheets for more space.)

2. For each corporate owner, list the name, address, and title of each officer of the corporation, the name and address of each director of the corporation, and the name and address of each shareholder who owns 2% or more of the stock of the corporation. Shareholders need not be disclosed as to corporations whose shares of stock are traded publicly on any national or regional stock exchange.

Name of Corporation: _____
Officers: _____
Address: _____
Directors: _____
Address: _____
Shareholders: _____
Address: _____

Name of Corporation: _____
Officers: _____
Address: _____
Directors: _____
Address: _____
Shareholders: _____
Address: _____

(Use additional sheets for more space.)

3. In the case of a trust, list the name and address of each trustee and the name and address of the beneficiaries of the trust.

Name of Trust: _____
Trustees: _____
Address: _____

Beneficiaries: _____
Address: _____

(Use additional sheets for more space.)

**SEMINOLE COUNTY
APPLICATION AND AFFIDAVIT**

For partnerships, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners.

Name of Partnership: _____ Name of Partnership: _____
Principal: _____ Principal: _____
Address: _____ Address: _____

(Use additional sheets for more space.)

5. In the circumstances of a contract for purchase, list the name of each contract vendee, with their names and addresses, the same as required for corporations, trust, or partnerships. In addition, the date of the contract for purchase shall be specified along with any contingency clause relating to the outcome of the consideration of this petition.

Contract Vendee: _____ Contract Vendee: _____
Name: _____ Name: _____
Address: _____ Address: _____

(Use additional sheets for more space.)

6. As to any type of owner referred to above, a change of ownership occurring subsequent to this application, shall be disclosed in writing to the Planning and Development Director prior to the date of the public hearing on the application.
7. I affirm that the above representations are true and are based upon my personal knowledge and belief after all reasonable inquiry. I understand that any failure to make mandated disclosures is grounds for the subject rezone, future land use amendment, special exception, or variance involved with this Application to become void. I certify that I am legally authorized to execute this Application and Affidavit and to bind the Applicant to the disclosures herein.

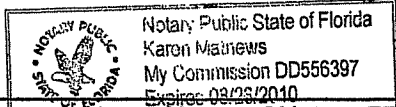
12/6/07
Date

Elizabeth Martin
Owner, Agent, Applicant Signature

STATE OF FLORIDA -
COUNTY OF Seminole

Sworn to (or affirmed) and subscribed before me this 7 day of December, 2007 by _____

Karon Matthews
Signature of Notary Public



Print, Type or Stamp Name of Notary Public

Personally Known _____ OR Produced Identification ✓
Type of Identification Produced Florida Drivers License

For Use by Planning & Development Staff	
Date: _____	Application Number: _____

SEMINOLE COUNTY DENIAL DEVELOPMENT ORDER

On February 25, 2008 Seminole County issued this Development Order relating to and touching and concerning the following described property:

LEG LOT 247 MIDWAY PB 1 PG 41

(The aforescribed legal description has been provided to Seminole County by the owner of the aforescribed property.)

FINDINGS OF FACT

Property Owner: Lizzie M Williams
2461 Center St
Sanford FL 32771

Project Name: Center St (2461)

Requested Development Approval:

Request for a rear yard setback variance from 20 feet to 7 feet (3' from the property line and 4' for the alley) for a proposed addition in R-1 (Single Family Dwelling District).

The Development Approval was sought to construct an addition within the rear yard setback. The applicant still retains reasonable use of the property without the granting of the requested variance.

The requested development approval is hereby denied.

Prepared by: Denny Gibbs, Senior Planner
1101 East First Street
Sanford, Florida 32771

Done and Ordered on the date first written above.

By: _____
Alison C. Stettner
Planning Manager

STATE OF FLORIDA)
COUNTY OF SEMINOLE)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared _____ who is personally known to me or who has produced _____ as identification and who executed the foregoing instrument.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, 2008.

Notary Public, in and for the County and State
Aforementioned

My Commission Expires:

SEMINOLE COUNTY DENIAL DEVELOPMENT ORDER

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FINDINGS OF FACT

Property Owner: Lizzie M Williams
2461 Center St
Sanford FL 32771

Project Name: Center St (2461)

Requested Development Approval:

Request for a rear yard setback variance from 20 feet to 7 feet (3' from the property line and 4' for the alley) for a proposed addition in R-1 (Single Family Dwelling District).

The Development Approval was sought to construct an addition within the rear yard setback. The Board of Adjustment finds that the proposed use would adversely affect the public interest and should not be permitted.

The requested development approval is hereby denied.

Prepared by: Denny Gibbs, Senior Planner
1101 East First Street
Sanford, Florida 32771

Order**NOW, THEREFORE, IT IS ORDERED AND AGREED THAT:**

- (1) The aforementioned application for development approval is **GRANTED**.
- (2) All development shall fully comply with all of the codes and ordinances in effect in Seminole County at the time of issuance of permits including all impact fee ordinances.
- (3) The conditions upon this development approval and the commitments made as to this development approval, all of which have been accepted by and agreed to by the owner of the property are as follows:
 1. The variance granted will apply only to the addition as depicted on the attached site plan.
- (4) This Development Order touches and concerns the aforescribed property and the conditions, commitments and provisions of this Development Order shall perpetually burden, run with and follow the said property and be a servitude upon and binding upon said property unless released in whole or part by action of Seminole County by virtue of a document of equal dignity herewith. The owner of the said property has expressly covenanted and agreed to this provision and all other terms and provisions of this Development Order.
- (5) The terms and provisions of this Order are not severable and in the event any portion of this Order shall be found to be invalid or illegal then the entire order shall be null and void.

Done and Ordered on the date first written above.

By: _____
Alison C. Stettner
Planning Manager

**STATE OF FLORIDA)
COUNTY OF SEMINOLE)**

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared _____ who is personally known to me or who has produced _____ as identification and who executed the foregoing instrument.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, 2008.

Notary Public, in and for the County and State
Aforementioned

My Commission Expires:

BOUNDARY SURVEY

PROPERTY DESCRIPTION: LOT 247, MIDWAY, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 1, PAGE(S) 41, OF THE PUBLIC RECORDS OF SEMINOLE COUNTY, FLORIDA.

