

FINDINGS OF FACT WORKSHEET

APPLICANT *(Please Print or Type)*

Name: _____

Address: _____

Phone: (_____) _____ - _____ Fax: (_____) _____ - _____

CASE NUMBER: _____

HEARING DATE: _____

1. Would the Applicant's property yield a reasonable return if the variation were denied?

2. Do special circumstances or unusual conditions exist on the property?

3. Will the proposed variation merely serve as a convenience to the Applicant?

4. Will the proposed variation relieve a demonstrated hardship?

5. Is the alleged hardship self-imposed?

6. Has the hardship been created by any person having a proprietary interest in the premises?

7. Will the proposed variation be harmful to the public health, safety, comfort, morals, or welfare of the residents and property owners of Somonauk?

8. Will the proposed variation impair adequate light and air to the Subject Property and/or adjacent properties?

9. Will the proposed variation increase congestion on any public street to the point of being hazardous to the public well being?

10. Will the proposed variation increase the risks of fire not only to the Subject Property, but to adjacent property?

11. Will the proposed variation alter the essential character of the neighborhood?
