



# Route 40 Design Manual Alternative Compliance Request Form

Howard County Department of Planning and Zoning  
3430 Courthouse Drive, Ellicott City, MD 21043

**DPZ File Number:**

**Date:**

**Project Name/Property Identification:**

**Address or Street name:**

The Route 40 Design Manual (Manual) allows for alternative compliance to the requirements of the Manual. If the Department of Planning and Zoning (DPZ) finds extraordinary hardship or practical difficulties with strict compliance with the requirements of the Manual, or if the Department determines that the purposes of the Manual may be better served by an alternate proposal, then a modification to the requirements may be granted. Applicants seeking modification to the requirements of the Manual shall submit this form to the Division of Comprehensive and Community Planning (DCCP) specifying the requirement they propose to fulfill through alternative compliance.

### Property Owner Information

Name:

Address:

City, State, Zip:

Telephone:

Email:

Signature:

### Request Preparer Information

Name:

Address:

City, State, Zip:

Telephone:

Email:

Signature:

### Request

List the requirement number and heading (e.g. SD-1, Setback Requirements) of the Route 40 Design Manual for which alternate compliance is requested. If requesting alternate compliance for more than one requirement, list each separately. (attach separate sheet if necessary)

**Justification**

All alternative compliance requests must be justified by the applicant. Incomplete or inadequate justification may result in rejection of the application. Justification must be specific to the subject property. The justification provided by the applicant should include all factors that rationalize or substantiate the request. The request must demonstrate that:

- 1. Strict compliance with the requirement(s) is not feasible or practical; or
- 2. An attractive alternate means of compliance is beneficial or preferred; and
- 3. Any perceived hardship is not self-created.

Summarize any extraordinary hardship or practical difficulties that may result from strict compliance with the requirement(s) of the Manual. Verify that the intent of the Manual will be served to a greater extent through implementation of the alternative compliance. If requesting alternate compliance for more than one requirement, list the justification for each separately. (attach separate sheet if necessary)

**Staff Recommendation**

Approve	Deny	Signature	Date
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**Director Decision**

Approve	Deny	Signature	Date
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**Conditions of Alternate Compliance (if approved)**

If approved, applicant must place note listing the Alternative Compliance Request and approval date in the General Notes section of the cover sheet for the project plans.