ZBA Application Instructions

Note:  The Zoning Board of Appeals may, in its sole discretion, refuse to act upon an application not properly completed and or lacking supporting documentation.

1.  The applicant shall complete the attached application form and submit it to the Land Use Office:
   - Applications will be reviewed for completeness by the Board at the meeting following its submission to the Land Use Office.
   - The Public Hearing will then be scheduled for the following month’s regularly scheduled Board meeting.
   - Applications must be accompanied by the applicable fee payable by cash or a check and made out to the Town of North Stonington. ($200 + $100 per regulation varied and $60.00 for CT DEP fee)

2.  Each application to the Board shall:
   - Fully set forth the circumstances of the case
   - Refer to the specific provisions of the Zoning Regulations involved
   - Exactly set forth the interpretation that is applied for and the grounds on which it is claimed that the variance should be granted
   - Identify the ‘Hardship’ necessitating the requested variance

3.  Eleven (11) copies of the following shall be submitted with the application:
   - The complete deed including all variances filed on the land records
   - Drawing of the proposed structure
   - If wetlands are involved, a statement from the Inland Wetlands Commission
   - A legible copy of the appropriate tax map and a plot plan showing property boundaries, building location, location of the well and septic system, proposed building/addition location including distances along boundaries, between buildings, and between buildings and boundaries. It must also show abutting property owners.
   - For an application for an addition to existing structures, a photograph of the existing structure showing where the addition is planned
   - The Tax Assessor’s Card (both sides) and GIS Map for the property

4.  Proof that abutting property owners within 100ft have been notified of the application shall be provided by the applicant at the Public Hearing.

   *Postal ‘Green Cards’ are acceptable proof if they were mailed a minimum of seven (7) calendar days prior to the date of the Public Hearing*

5.  Each applicant will be notified by mail as to the date of the Public Hearing. The applicant and/or designated representative shall be present at the Public Hearing to offer evidence in support of the application.

   An applicant other than the property owner shall have a ‘Notarized Power of Attorney’ from the owner designating said applicant as the duly authorized representative for the application.

6.  Any additional documentation/evidence presented during the Public Hearing will become the property of the ZBA.

   The applicant shall make at least eleven (11) copies of all additional information so that each member or the Board has a copy, and the remaining copies will be for the Record and the Land-Use Offices.
A. To the Zoning Board of Appeals
In a matter involving property owned by: ________________________________________________
Street Address: _______________________________________________________________________
Mailing address: _______________________________________________________________________

Located on the ____________________ side of ____________________________________________
approximately __________ feet, ____________________ (direction) from the intersection of
____________________________________________________________________________________
with ____________________ in a _______ zone.

Street address of property in question: ________________________________________________
Tax Map__________ Lot ____________

I (We) hereby appeal/apply to the Board for the following:

_____ 1. Correction of an error in an order, requirement, or decision made by the Zoning Enforcement Officer (explain below)
_____ 2. A variance from the application of the Town of North Stonington Zoning Regulations

This application relates to the following:

Use Variance______, Variance to Bulk Requirements ______, Location Approval for MV Dealer/Repair Facility _______, or Other
(explain)_____________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Is the property located within 500 feet of another town?
Yes_____ No______. If ‘yes’, name of town _______________________

Describe the order or decision complained of or the variance requested, and indicate the Section(s) of the North Stonington Zoning Regulations pertaining to the application:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Application Fee $200.00 + $100 per regulation varied + $60.00 CT DEP fee
Check No./Cash _____________

Form PZ110-003
B. What the applicant proposes to do with the property in question: (be specific)
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

C. Grounds for Appeal or Variance – Please state hardship and how the Zoning Regulations have caused this hardship.
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

D. Owner Information and signature:
Name: __________________________________________________________
Address: ______________________________________________________________________
Phone No.: ______________________ E-mail: _________________________________
Submitted by: _____________________________________________________________
(Owner’s Signature)

E. If the person filing this application is other than the owner:
Name: ________________________________________________________________
Address: ______________________________________________________________________
Phone No.: ______________________ E-mail: _________________________________
Submitted by ____________________________
(*Applicant’s Signature)

*An applicant other than the property owner shall have a ‘Notarized Power of Attorney’ from the owner designating said applicant as the duly authorized representative for the application.

Date completed and filed by ZBA Office: ____________________________