

TOWN OF OLD LYME : ZONING BOARD OF APPEALS APPLICATION FOR VARIANCE

INSTRUCTIONS

HEARINGS Second Tuesday of each month (except August and December) at 7:30 p.m. at the Memorial Town Hall on Lyme Street. The Applicant or his/her agent must be present at the hearing.

DOCUMENTS Submit application in duplicate. Submit supporting documents required under Part 6 in single copy.

FEE \$130 (includes ERT fee required under Public Act 92-235). Application fee of \$130 and recording fee of \$13 must be submitted at time of application in two separate checks payable to the Town of Old Lyme. Additional fee required for CAM application if required.

FILING No later than 4 pm on the 1st Friday of the month preceding the month of the hearing by delivery to the Zoning Enforcement Official, second floor of the Town Hall (tel. 434-9174, office hours 9-4 weekdays).

DECISIONS Notices of ZBA decisions are mailed to applicants within 15 days of Voting Session.

PERMITS No building or zoning permit on a granted variance will be issued until the Notice of Variance Granted is recorded in the Town Clerk's Office.

Work under granted variances must begin within six (6) months of the effective date and be substantially completed within one (1) year; if not, variance becomes void. Application for an extension to continue work may be made, without fee, but must be submitted before expiration date.

RE-HEARING No application for re-hearing of a denied variance can be made until six months after receiving official notice of the decision, and will be heard only if new facts are alleged. Applicant must submit a separate typed statement of the new facts.

N O T I C E

Application to the Board for a variance under the Zoning Regulations is not deemed complete unless it contains all required information and documents. No matter shall be assigned for hearing unless a completed application, WITH ALL SUPPORTING DOCUMENTS AND PAYMENT OF THE REQUIRED FEE, is timely filed.

"[T]he existence of any present nonconformity anywhere in the Town shall not in itself be considered grounds for the approval of a variance for any other use, building or other structure or lot." (Old Lyme Zoning Regs., 8.1.)

APPLICATION FOR VARIANCE

ZBA# _____

TO: ZONING BOARD OF APPEALS, TOWN OF OLD LYME:

APPLICATION FOR A VARIANCE IS HEREBY MADE, RELATING TO THE FOLLOWING PROPERTY:

Premises Street Address _____
Assessor's Map # _____ Lot # _____ Zone _____ Area _____ Sq. Ft. _____
Existing Coverage _____ % Proposed Coverage _____ %

Owner Name _____ Tel # _____
Mailing Address _____

Applicant Name _____ Tel # _____
(if other Mailing Address _____
than _____
owner) _____

Representative at Name _____ Tel # _____
hearing Mailing Address _____

PRIOR APPEALS: Has any previous appeal been filed relating to these premises?

No () Yes () When _____ Appeal # _____

Board Action _____

1. VARIANCE IS REQUESTED OF THE FOLLOWING PROVISIONS OF THE OLD LYME ZONING REGULATIONS:

Section No.	Requirement	Specific Variance Needed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. The variance is needed to allow: _____

(specify use, dimensions and location of any proposed construction)

3. Strict application of the Zoning Regulations would produce unusual hardship or exceptional difficulty because:

4. The hardship would be unique and not shared by others in the area because:

5. The variance will be in harmony with the purpose and intent of the Regulations because:

(If the hardship is imposed by topographical conditions, support with photographs or a topographical survey of the terrain.)

6. Checklist of documentation that must accompany this application:

Check boxes to show items enclosed:

- | | |
|--|---|
| <input type="checkbox"/> Duplicate copy of application | <input type="checkbox"/> Copy of owner's deed to premises |
| <input type="checkbox"/> Plot plan of premises <u>drawn to scale</u> showing lot dimensions, total area; required front, side and rear yards; location and size of existing and proposed buildings; location of well and septic system | <input type="checkbox"/> Elevation drawings of proposed construction |
| <input type="checkbox"/> Floor plan(s) of existing and proposed buildings | <input type="checkbox"/> Photographs of premises and area to be altered |
| <input type="checkbox"/> Copies of all assessor's records from 1960 to present | <input type="checkbox"/> Sketch map of area showing location and distance of neighboring buildings, and of neighboring wells and septic systems |
| | <input type="checkbox"/> Copy of Health Dept. approval for proposed application or activity |

**7. NAMES AND ADDRESSES OF ALL PROPERTY OWNERS WITHIN 100' OF THIS PROPERTY.
(Include zip codes and winter address, if different, and attach supplemental
sheet if space is insufficient.)**

NAME _____ Assessor's Map # _____ Lot # _____

ADDRESS _____

NAME _____ Assessor's Map # _____ Lot # _____

ADDRESS _____

NAME _____ Assessor's Map # _____ Lot # _____

ADDRESS _____

NAME _____ Assessor's Map # _____ Lot # _____

ADDRESS _____

NAME _____ Assessor's Map # _____ Lot # _____

ADDRESS _____

NAME _____ Assessor's Map # _____ Lot # _____

ADDRESS _____

NAME _____ Assessor's Map # _____ Lot # _____

ADDRESS _____

NAME _____ Assessor's Map # _____ Lot # _____

ADDRESS _____

8. Is this property located within 500' of a Town line?

() Yes

() No

If yes, and appeal is for variance of use of property, the ZBA must notify the neighboring Town Clerk.

9. Does the requested variance involve a change of use, any extension or expansion of a non-conforming use or structure, new construction of a principal building or expansion of its habitable space?

() Yes

() No

I (WE) CERTIFY that the statements hereinabove made and the documents submitted herewith are true to the best of my (our) knowledge and belief.

SIGNATURES: APPLICANT

Date

OWNER

Date