

ZONING BOARD OF APPEALS
Bethany, Connecticut

ZONING VARIANCE APPLICATION

(Please Print Or Type All Information And Attach Additional Pages As Needed)

For Office Use Only:

Application Submission Date : _____
Application Day Of Receipt (Bylaws, Sec. 8.C.2) : _____
Board's Decision On This Application And Date : _____

INSTRUCTIONS TO APPLICANTS:

Fees: \$ 60.00 State Fee - Check or Money Order, Payable to "Town of Bethany". No cash, please.
\$350.00 Town Fee - Check or Money Order, Payable to "Town of Bethany". No cash, please.

Submit one (1) original and ten (10) copies of this completed application and applicable checklist items to:

Bethany Zoning Board of Appeals
c/o Zoning Enforcement Officer
40 Peck Road
Bethany, CT 06524

Applicants Are Encouraged To Consult With The Bethany Zoning Enforcement Officer When Completing This Application

Applicant's Name: _____
(last) (first) (middle initial)

Address: _____
(number) (road) (town)

Telephone: _____
(day) (evening) (cell)

Agent's Name: _____
(last) (first) (middle initial)

Address: _____
(number) (road) (town)

Telephone: _____
(day) (evening) (cell)

Property Owner's Name: _____
(last) (first) (middle initial)

Address: _____
(number) (road) (town)

Telephone: _____
(day) (evening) (cell)

Send ZBA correspondence to (select one): Applicant Agent Property Owner

Subject Property Address: _____

Zone: _____ Assessor's Map #: _____ Lot #: _____

Deed To Property Recorded In: Volume _____ Page _____

Lot Dimensions: Width _____ Depth _____ Area _____

1. List all existing buildings and uses on the lot and the legal basis for each (use "P" for permitted use; "PV" for previous variance; "NCU" for nonconforming use existing at the effective date of zoning regulation or amendment; "O" for other, please explain):

2. The following variance(s) is(are) requested of the Bethany Zoning Regulations:

Section number	Zoning Requirement
1.	_____
2.	_____
3.	_____

3. The precise variance sought (for example, "5 foot variance of the rear yard setback to allow a 45 foot rear yard"): _____

4. Reason for variance (for example, "installing a pool", "building an addition"):

5. The following special conditions and circumstances exist which are unique to the subject property but which do not affect generally the district in which it is situated and which do not result from the actions of the Property Owner: _____

6. Strict and literal interpretation and enforcement of the Zoning Regulations would deprive the Property Owner of rights commonly enjoyed by other properties in the same district:

7. Literal enforcement of the Zoning Regulations would result in exceptional difficulty or unusual hardship to the Property Owner because: _____

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

9. The following, prior variance applications and decisions by the Board were made for the subject property (State whether the same or a similar variance, as applied for here, was requested of the Board):

I have attached the required documents as noted on the Attachments Checklist.

Applicant/Agent Signature

Applicant/Agent Signature

CONSENT OF OWNER:

By signing this Application, I/we hereby give permission to
to apply to the Bethany Zoning Board of Appeals for the variance requested in this Application for my/our
property located at _____, Bethany, CT.

**I/We also give the members of the Bethany Zoning Board of Appeals permission to enter onto
my/our property for purposes of a site visit during the application process.**

Property Owner Signature

Property Owner Signature

VARIANCE APPLICATION ATTACHMENT CHECKLIST

1. _____ Eleven (11) copies of a Locational Map such as an excerpt from the appropriate Assessor's Map (Zoning Board of Appeals Bylaws, Section 7.A.4.b).
2. _____ Filing Fee(s) (Zoning Board of Appeals Bylaws, Section 7.A.4.c).
3. _____ A copy of written notice to water utilities and documentation confirming delivery (Zoning Board of Appeals Bylaws, Section 7.A.4.d).
4. _____ Eleven (11) prints of an A-2 Zoning Location Survey (Zoning Board of Appeals Bylaws, Section 7.A.4.f.1), *or in the alternative if a survey waiver is requested*, eleven (11) prints of a Class D Survey and one (1) original and ten (10) copies of a written waiver request (Zoning Board of Appeals Bylaws, Section 7.B).
5. _____ Eleven (11) prints of a Topographic Survey (if topographical conditions are claimed as a hardship) (Zoning Board of Appeals Bylaws, Section 7.A.4.f.2).
6. _____ Statement as to whether notice to adjoining municipality is required (Zoning Board of Appeals Bylaws, Section 8.E.4).
7. _____ Statement as to whether notice to adjoining municipality is required (Zoning Board of Appeals Bylaws, Section 8.E.5).
8. _____ Two (2) copies of the deed to the property, including a property description of the subject property.

Notes to Applicant

- You must notify surrounding properties within 100 feet of the boundaries of the subject property of the applicant's name and time, date, place and purpose of the public hearing and shall do so by first class mail on forms provided by the Commission. Said notice shall be mailed at least ten (10) days prior to the public hearing date, not including the date of the mailing and the date of the hearing. The applicant or applicant's agent shall provide a "certificate of mailing" at the time of the public hearing, as part of the applicant's record.