TOWN OF EAST HADDAM
ZONING BOARD OF APPEALS VARIANCE/APPEAL/OTHER APPLICATION

For Internal Use Only:

MEETING DATE: ____________________ **APPLICATION NO.** __________

CONTINUED DATE: ____________________ **Date Granted/Denied:** __________

APPLICATION FEE PAID: ____________________

*For this application to be heard at the next Zoning Board of Appeals regularly scheduled meeting, it needs to be filled out completely.

*All of the items noted below in Paragraphs 1 through 4 must be filled out completely, regardless.

*The Zoning Board of Appeals' Secretary will review your application and contact you if your application is missing pertinent information. If she cannot get in touch with you before the deadline for the submission of the legal notice, your application will be denied without prejudice because it is incomplete. You may resubmit your new application after completing the missing information for the next regularly scheduled meeting with the Zoning Board of Appeals' Secretary. This will require the standard fee and waiting period.

If help is needed in any part for the completion of this application, please call the Land Use Office at 860-873-5031. Email - landuse@easthaddam.org

* *

1. Please check below which applies to your reason for submitting this application:

I (we) hereby apply to the Zoning Board of Appeals for the following:

_____ A Variance for the following sections of the Zoning Regulation: Section 10.1

1. Continuation of a sideyard non-conformity **OR**
2. Lot coverage - 13.5% requested, 12.7% existing, 10% permitted

_____ To Appeal a ruling/action of the Zoning Enforcement Officer relating to: __________

__________ **OR**

_____ Other: __________

____

2. ***This section needs to be filled out completely:*** **LOCATION OF AFFECTED PREMISES:**

Property Location 271 EH Colchester Turnpike

Assessor's Map No. 67 **Lot No.** 08 **Deed Reference: Volume** ______ Page ______

Location on the West **side of** EH Col Tpke **Street/Road/etc**

2000 **feet distance from the intersection of** EH Col Tpke + Mott Lane.

Section of Town: Moodus Reservoir **Zone:** L

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2000 **feet distance from the intersection of** EH Col Tpke + Mott Lane

Section of Town Moodus Reservoir **Zone:** L

Owner/Applicant Name Owner Phone# 203-215-8421

Owner/Applicant Email fritz@craftsmenge.com

Owner Fred Masotta Mailing Address 380 Hillfield Rd Hamden Ct 06518

Appellant(s) _____ Address _____

Lessee _____ Address _____

Agent _____ Address _____

3. If no previous appeals have been made to this property, please mark *N/A* here: _____

But if a PREVIOUS APPEAL(S) has been made with respect to this property, please supply the Application No. 1099 and the Date that it was Approved/Denied: April 26, 2018

4. Describe the nature of the variances as it relates to the zoning regulations (this must be filled out so the Board understands the purpose of the application): Confirmation of a side yard non conformity of the location of the shed. Addition lot coverage 13.5% where 12.7% exists and 10% is permitted

5. This application relates to:

✓ area; ____ number of family units; ____ signs; ____ street frontage; ✓ yard dimension ; ____

or other (please explain): _____

6. Please state any deed restrictions (if there are none, please write N/A): NA

7. Is this property within 500 feet of Colchester, Salem, Old Lyme, Haddam or East Hampton?

If yes, which town(s) (if not, write N/A) : NA

8. With respect to any VARIANCE of the Zoning Regulations, which is requested, please complete the (a), (b) and (c) below:

(a) Strict application of the regulations would produce an UNDUE HARDSHIP because: The house is on a slab due to the high water table and there is no room for storage for a large lot.

(b) The hardship created is UNIQUE and not shared by all other properties alike in the neighborhood because: Neighbors to the right and left have sheds close to the property line

(c) The variance would not change the CHARACTER OF THE NEIGHBORHOOD because:

See B

9. With respect to an APPEAL from a ruling or action of the Zoning Enforcement Officer, the appeal should be sustained because: _____

10. You must mail a letter to all adjoining Property owners within 100 feet of your property lines, including across the street, by certified mail/return receipt at least 14 days prior to the scheduled Public Hearing date. (See Page 5 of this application which can be used as the letter.

(a) LIST the abutting property owners that you are required to notify in #11 of this application.

(b) YOU MUST PRESENT the certified mail & return receipts (white certified mail receipts and green return receipts cards) at the Public Hearing in order for your appeal to be heard. This is your proof that you notified the required property owners within the required time frame by law.

11. List ALL ADJOINING PROPERTY OWNERS within 100 feet of your property lines, including across the street. Please supply mailing addresses. You may use the back of this sheet if necessary.

Map_____ Lot_____ Name _____ Address_____

Map_____ Lot_____ Name _____ Address_____

Map_____ Lot_____ Name _____ Address_____

Map_____ Lot_____ Name _____ Address_____

Map_____ Lot_____ Name _____ Address_____

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Map_____ Lot_____ Name _____Address_____

Map_____ Lot_____ Name _____Address_____

Map_____ Lot_____ Name _____Address_____

12. A PLOT PLAN is required to show the property lines, building lines, location of septic system, well and other structures on property along with your proposed addition, garage, shed, i.e. or whatever else your variance is needed for must also be indicated on the PLOT PLAN as well as the distances from <u>all</u> property lines. The Board, at its discretion, may require an A-2 survey on any application.

13. Submit this completed application with <u>Site Plan drawn to A-2 standard</u> (but not required to be surveyor or engineer certified) **<u>and Application/Appeal fee of $160.00</u>** to the Zoning Board of Appeals mailbox located in the Land Use Office at least 17 days before the next scheduled public hearing in order to be placed on the agenda for that hearing. Failure to submit your application, map, and payment will be a cause for the application to be incomplete. See the chart below to make sure you have your application in on time.

Date Filed: 3-23-23

_____
Signed by Property Owner(s)

_____
Signed by Appellant(s) or Agent