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

For Internal Use Only:
MEETING DATE: 9-6-22 APPLICATION NO. 2201
CONTINUED DATE: _____ Date Granted/Denied: _____
APPLICATION FEE PAID: $160.00

*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

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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: 10.1 side yard ***OR***

____ 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 18 Johnsonville Rd. Moodus, CT 06469

Assessor's Map No. 55 **Lot No.** 185 **Deed Reference: Volume** _____ Page _____

Location on the East **side of** Johnsonville Rd Street/Road/etc

350 **feet distance from the intersection of** Rt 149.

Section of Town: Johnsonville **Zone:** R-1

Owner/Applicant Name Bruce J. Dutch Phone# 860.790.2176

Owner/Applicant Email BJD10280@gmail.com

Owner Bruce J. Dutch Mailing Address 18 Johnsonville Rd. Moodus, CT 06469

Appellant(s) _____ Address _____

Lessee _____ Address _____

Agent _____ Address _____

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

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

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): Place a garage 13 feet from the side yard where 25 feet is required.

5. This application relates to:

_____area; _____number of family units; _____signs; _____street frontage; ✓ yard dimension; _____ or other (please explain): See 4

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

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) : N/A

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: Driveway is existing, septic on the north side of the building.

(b) The hardship created is UNIQUE and not shared by all other properties alike in the neighborhood because: Property created prior to zoning and Regulation

(c) The variance would not change the CHARACTER OF THE NEIGHBORHOOD because:
Many pre existing non conforming structures are in the neighborhood with both structures close to the property lines

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

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 055 Lot 186 Name Ron + Christine Spencer Address 16 Johnsonville Rd, Moodus, CT 06469

Map 055 Lot 196 Name Jan + Barbara Kubrynski Address 25 Johnsonville Rd. Moodus, CT 06469

Map 055 Lot 001 Name Chadad Lubavitch Address P.O. Box 248 Moodus, CT 06469

Map 055 Lot 184 Name Bruce M. Dutch Address P.O. Box 464 Moodus, CT 06469

Map 055 Lot 195 Name Bruce Dutch Address P.O. Box 464 Moodus, CT 06469

Map ____ Lot ____ Name ____ Address ____

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 all property lines. The Board, at its discretion, may require an A-2 survey on any application.

13. Submit this completed application with Site Plan drawn to A-2 standard (but not required to be surveyor or engineer certified) **and Application/Appeal fee of $160.00** 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: _____

_____

Signed by Property Owner(s)

_____

Signed by Appellant(s) or Agent

This form adopted by East Haddam Zoning Board of Appeals by resolution dated 12/28/06.