APPLICATION
ZONING BOARD OF APPEALS
BRIDGEWATER, CT. 06752

AN APPLICATION FEE OF $75.00 MUST ACCOMPANY THIS APPLICATION.
(Make checks payable to the Town of Bridgewater.)
PLEASE CONSULT THE ZONING REGULATIONS WHEN APPLYING FOR A VARIANCE.

Provided Courtesy of: Arthur H. Howland & Associates, P.C., Civil Engineers & Land Surveyors, Call Us! (860) 354-9346
Visit http://ahhowland.com For More Info! (This Text Will Not Print When You Print Document)

APPLICANT'S NAME _____ ADDRESS _____

OWNER'S NAME _____ ADDRESS _____

PROPERTY LOCATION _____ ZONE _____

Developer's Map # _____ Volume _____ Page _____ Tax Map # _____ Lot # _____ Acerage _____

Deed _____ Volume _____ Page _____

I AM HEREBY APPLYING TO THE ZONING BOARD OF APPEALS FOR:

_____ A variance from the Zoning Regulation because my zoning application does not conform to zoning requirements.

_____ A ruling of the Zoning Commission alleging there is an error in the decision of the Enforcement Officer of the Commission.

VARIANCE DESCRIPTION: In the space below, please state the section (s) of the Zoning Regulations proposed to be varied and the specific variance requested. (I.e.: A variance is requested to Section 4.04A to build an addition with a 45 foot back yard setback instead of the 50 feet required in a R3 zone. Therefore a 5-foot variance will be needed.) Attach additional pages if necessary.

_____

_____

_____

HARDSHIP DESCRIPTION: In the space below, state the specific conditions pertaining to the perceived "exceptional difficulty or unusual hardship" with respect to the parcel of land, not generally encountered within the zoning district, which would make development in full accordance with the existing Zoning Regulations extremely difficult. Attach additional pages if necessary.

_____

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_____

THE FOLLOWING MATERIALS SHALL BE ATTACHED:

All submitted plans and documents shall bear the signature, seal, and/or license number of the professional responsible for preparing each item.

1. A copy of the list of owners within 500' of the subject property as shown by Tax Map & Lot #.
2. A copy of an A-2 Survey of the subject property showing all existing building and site conditions.
3. A copy of the Site Development Plan showing all proposed additions, including septic systems, wells, and all measurements pertaining to the application, such as location and distance(s) of the proposed structure from the subject property line.
4. A copy of previous Zoning Variances describing any variances and the action taken.
5. A copy of the Deed. ($1.00 per page in the Town Clerk's Office).

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IS THE SUBJECT PROPERTY LOCATED WITHIN 500' OF THE BOUNDARY OF ANY OTHER TOWN? IF SO WHICH TOWN(S)? _____

The applicant understands that this application will be considered complete only when all information and documents required by the Board have been submitted.

The undersigned warrants the truth of all statements contained herein and all supporting documents according to the best of his or her knowledge and belief; and hereby grants visitation and inspection of the subject property as described herein.

APPLICANT'S SIGNATURE DATE PHONE

OWNER'S SIGNATURE DATE PHONE

For Office Use Only:

APPLICATION # _____ **DATE SUBMITTED** _____

FEE PAID _____