

Town of West Hartford - Department of Community Development Planning & Zoning Division 50 South Main Street, Room 214, West Hartford, CT 06107 P: (860) 561-7555 www.westhartfordct.gov

Date:

Petition #\_\_\_\_\_

Fee \$

## **ZONING APPLICATION FOR: (check one of the following)**

VARIANCE	(Please compl	ete Sections	A. B	and D
	(p-		,	

SPECIAL EXCEPTION (Please complete Sections A, C and D)

MOTOR VEHICLE DEALER/REPAIRER LOCATION APPROVAL (Sections A, D and Please Include Motor Vehicle **Location Approval Information Sheet)** 

APPEAL RULING OF ZONING ENFORCEMENT OFFICER

Section A:
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LOCATION OF PROPERTY

(NEAREST CROSS STREET)	(LOT #)	(ZONING DISTRICT)

APPLICANT

(NAME)

(ADDRESS)

(TELEPHONE #) (EMAIL)

APPLICANT'S INTEREST IN PROPERTY \_\_\_\_\_

RECORD OWNER OF PROPERTY (NAME)

(ADDRESS)

(TELEPHONE #)

(EMAIL)

DATE OF PROPERTY ACQUIRED BY PRESENT OWNER



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## Section B: For VARIANCE applications only. Please include the following information (you may include additional sheets if necessary):

1. Please briefly explain the nature of the variance and amount of variance being requested. Also, please list the sections of the Zoning Ordinance(s) that are applicable to the variance request.

2. The West Hartford ZBA generally is authorized to grant a variance only where the applicant can establish that a literal enforcement of the Town's Zoning Regulations would result in exceptional difficulty or unusual hardship to the property owner.

Explain why complying with the zoning ordinance(s) listed above would result in exceptional difficulty or unusual hardship to the property owner, also known as an undue hardship. An undue hardship is generally defined as being a peculiar or unique feature of a piece of property that prevents the landowner from making a reasonable use of the property when adhering to the zoning regulations. A hardship cannot be personal or financial in nature.

3. Would the variance change the character of the neighborhood and/or be detrimental to public health, public safety, and welfare and property values?

4. This application must be accompanied by site plan(s), and any other information relevant to the requested variance or required by the Zoning Ordinance, or Rules of the Board. What information is included with this application?

6. Additional Information:



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## Section C: For SPECIAL EXCEPTION applications only. Please include the following information if applicable (you may include additional sheets if necessary):

1. Please describe the Special Exception (home-based business) being sought and any specialized training of the applicant that pertains to the proposed business. Include copies of any certificates or other documentation.

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2.	List the proposed hours of t	he home-based business:				
W	eekday Hours:	Evening Hours:	Weekend Hours:			
3.	List the proposed hours in w	which clients will be able to visit the	home-based business:			
W	eekday Hours:	Evening Hours:	Weekend Hours:			
4.	Number of parking spaces (	please also include a map that shows	s the location of parking spaces):			
5.	Number of nonresident employees:					
6.	Number of clients per day:     the business? (yes/no)					
7.	. Will you be requesting any signage for the business (not to exceed one square foot) on the property? If yes, please describe the proposed size and content of the sign.					
8.	Additional Information:					
Se	ection D:					

The undersigned warrants the truth of all statements contained herein and in all supporting documents to the best of his/her knowledge and belief. Furthermore, the applicant agrees that submission of this document constitutes permission and consent to Board and Staff inspections of the site. *Note: Notice is hereby given the Connecticut Department of Public Health must be notified by applicants for any project located within a public water supply aquifer protection area or watershed area. (CTDPH website at <u>http://www.dph.state.ct.us</u>)* 

SIGNATURE OF PROPERTY OWNER

DATE

SIGNATURE OF APPLICANT

DATE



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