



ZBA Application No. _____

**ZONING BOARD OF APPEALS
TOWN OF COLCHESTER, CONNECTICUT**

**APPLICATION FOR VARIANCE
APPEAL OF ZONING ENFORCEMENT OFFICER DECISION
CERTIFICATE OF APPROVAL FOR LOCATION OF GASOLINE
STATIONS AND OTHER MOTOR VEHICLE USES**

This application form, applicable fee(s), five (5) sets of plans and all required supporting documentation shall be submitted to the Land Use Office no later than noon (12:00P) on the last business day of the month to be on the agenda for the next regularly scheduled meeting (third Tuesday of the following month). The Applicant shall submit a copy of the Assessor's Map showing all properties and zoning districts within 150 feet of the subject property and a list of the names and addresses of all owners within 150 feet of the subject property. Public Hearing is Required.

NAME OF APPLICANT: _____
(Please Print)

MAILING ADDRESS: _____

EMAIL ADDRESS: _____ TELEPHONE: _____

OWNER OF RECORD: _____
(Please Print)

MAILING ADDRESS: _____

STREET ADDRESS OF SUBJECT PROPERTY: _____

ASSESSOR'S MAP: _____ LOT: _____ ZONING DISTRICT: _____

REASON FOR APPLICATION TO ZBA (Check one):

- CLAIM OF ERROR, REQUIREMENT OR APPEAL OF DECISION MADE BY THE ZONING ENFORCEMENT OFFICER.
- A VARIANCE IN THE APPLICATION OF THE ZONING REGULATIONS IS REQUESTED:

SPECIFIC SECTION(S) TO BE VARIED: _____

PURPOSE OF VARIANCE REQUEST: _____

STATEMENT OF EXCEPTIONAL DIFFICULTY OR UNUSUAL HARDSHIP: _____

- CERTIFICATE OF APPROVAL FOR A USE FOR WHICH THE ZONING BOARD OF APPEALS IS REQUIRED BY SPECIFIC TERMS OF THE COLCHESTER ZONING REGULATIONS OR CONNECTICUT STATE STATUTES.

CONTACT PERSON TO WHOM CORRESPONDENCE AND INQUIRIES SHOULD BE DIRECTED:

NAME: _____
(Please Print) (Firm Name, if Applicable)

MAILING ADDRESS: _____

EMAIL ADDRESS: _____ TELEPHONE: _____

APPLICANT(S) SIGNATURE _____ DATE _____

OWNER(S) SIGNATURE _____ DATE _____

**** IF THE APPLICANT IS NOT THE RECORD OWNER, A SIGNED LETTER OF AUTHORIZATION MUST ACCOMPANY THIS APPLICATION ****

FOR OFFICIAL USE ONLY BELOW THIS LINE

DATE APPLICATION SUBMITTED: _____ P&ZC FEE PAID: \$ _____ CK# _____

DATE OF RECEIPT BY P&ZC: _____ PUBLIC HEARING START DATE: _____

PUBLIC HEARING END DATE: _____ DATE OF DECISION: _____

NOTICE OF DECISION PUBLISHED: _____ ENGINEERING REVIEW FEES PAID: _____

ZONING BOARD OF APPEALS APPLICATION CHECKLIST

Application deadline for Zoning Board of Appeals is 12:00 PM (Noon) of the last business day of the month to be on the agenda for the next regularly scheduled meeting (third Tuesday of the following month). *No application to the Zoning Board of Appeals shall be considered complete unless all information listed below is included and the application properly completed and signed by all parties. NO hearing will be scheduled for incomplete applications.*

- [] Application (all items filled out completely and in detail), signed and dated by applicant (and property owner of record if different than applicant; a signed letter of consent will suffice in lieu of property owner's signature).
- [] \$410.00 Application Fee: \$100.00 Administrative Fee + \$200.00 Public Hearing Fee + \$50.00 Zoning Review Fee + \$60.00 State fee. Please make checks payable to "Town of Colchester". Fee is non-refundable once application is submitted.
- [] Required supporting documentation:
 - [] Ten (10) copies of a site plan, drawn to a scale of 1" = 40', or other such scale which provides sufficient detail;

Note: Said plan shall show location, setbacks and size of existing buildings and uses and of all proposed buildings and uses, as well as other pertinent information such as water supply, subsurface sewage disposal systems, etc. All plans accompanying an application for a dimensional variance MUST be certified by a CT Licensed Land Surveyor to A-2 horizontal accuracy standards.
 - [] Copy of the property deed, including property description;
 - [] Assessor's Map showing the subject parcel and all properties within 150' of the boundaries of said parcel, including across the street;
 - [] List of abutting property owners within 150' of all property boundaries, including across the street.
- [] The applicant shall mail a copy of the Notice of Public Hearing (which will be mailed to you) to all abutting property owners not less than seven (7) days prior to the Public Hearing date. Evidence of such mailing in the form of Post Office Certificates of Mailing shall be submitted to the PZC Department or at the meeting prior to the opening of the Public Hearing.

Applications shall be submitted to:

Land Use Department
Town of Colchester
127 Norwich Avenue, Suite 105
Colchester, CT 06415

NOTE: It is the applicant's responsibility to ensure that all information is accurate and all required information has been submitted.