



# TOWN OF NEW MILFORD

## *Zoning Board of Appeals*

10 Main Street

New Milford, Connecticut 06776

(860) 355-6095

[www.newmilford.org](http://www.newmilford.org)

Revised 11/12

### GUIDELINES FOR VARIANCE APPLICATIONS

A variance represents permission to do something that is otherwise prohibited by the Zoning Regulations. A variance must be in harmony with the general purpose and intent of the Zoning Regulations with due consideration for public health, safety, convenience and welfare. There must be some specific condition affecting the parcel of land but not generally affecting other parcels in the same zone which would cause an “exceptional difficulty or unusual hardship” if a variance were not granted. “Hardship” must derive from the land itself and is brought about by circumstances beyond the control of the applicant.

### INSTRUCTIONS FOR FILING A VARIANCE APPLICATION

- I. A completed application form (pages 2 & 3 of this packet). All information requested on the form must be provided. This includes the specific section of the Zoning Regulations you are requesting a variance from and the exceptional difficulty or unusual hardship. For appeals from the decisions of the Zoning Enforcement Officer provide a full explanation of why you believe the decision is not supported by the provisions of the Zoning Regulations. **Please note the original signature of the property owner is required on page 2 & 3 of the application for variance requests. Scanned, faxed, copied, computer generated (etc.) signatures are not acceptable.**
- II. A plot plan showing the location of all existing and proposed buildings depicting all dimensions, drawn to scale. If the variance is for relief of setbacks, an up to date A-2 survey, prepared by a Connecticut licensed surveyor showing existing conditions, proposed alterations, and the exact setback distances from the property lines to the nearest point of any proposed construction is required.
- III. The location of well or water source, sewer lines and/or septic and reserve area, rights-of-ways, easements and restrictions, steep slopes and wetlands should be included on the A-2 Survey to support the hardship stated.
- IV. When construction is involved, exterior drawings to scale showing complete elevations or preliminary building plans.
- V. Supporting documentation, as outlined on page 3 of this packet, including evidence of certified mail notification of the hearing to property owners of record abutting the parcel and directly across the street. Property owner information can be found in the Tax Assessor’s office.
- VI. Fees as outlined on page 3 of this packet.

### SUBMISSION DEADLINE

Due to the timeframe for notice of public hearing, outlined in §8-7d of CTGS and referenced in the Zoning Board of Appeals (ZBA) Bylaws section IV, Notice of Hearing, variance applications must be received a minimum of **twenty-five (25) days prior** to a regular meeting date in order to be placed on that meetings agenda.

# Town of New Milford

## Zoning Board of Appeals

10 Main Street  
New Milford, CT 06776  
860-355-6095

### OFFICE USE

Date Received: \_\_\_\_\_  
APPEAL NO.: \_\_\_\_\_  
Hearing Date: \_\_\_\_\_  
App. Fee: \_\_\_\_\_ Recording Fee: \_\_\_\_\_  
ck #: \_\_\_\_\_ ck #: \_\_\_\_\_

### APPLICATION

- 1) Type of application:  
 \_\_\_\_\_ Request for Variance from Town of New Milford Zoning Regulations  
 \_\_\_\_\_ Appeal the decision of the Zoning Enforcement Officer\* CEASE & DESIST ORDER DATE: \_\_\_\_\_  
 \*Application must be made within 30 days of the issue date of the Cease and Desist Order
- 2) Property address: \_\_\_\_\_  
 Is the property within 500 ft. of Kent, Sherman, Brookfield, Bridgewater or Washington? No: \_\_\_ Yes/Town: \_\_\_\_\_  
 Will any part of the existing structure be demolished? \_\_\_\_\_ Is property in the floodway or floodplain? \_\_\_\_\_
- 3) Zone \_\_\_\_\_ Assessor's Map # \_\_\_\_\_ Lot # \_\_\_\_\_ Area (sq ft) \_\_\_\_\_
- 4) Owner of Record: \_\_\_\_\_ e-mail: \_\_\_\_\_  
 Mailing address: \_\_\_\_\_ phone: \_\_\_\_\_  
 Applicant (if different): \_\_\_\_\_ e-mail: \_\_\_\_\_  
 Mailing address: \_\_\_\_\_ phone: \_\_\_\_\_
- 5) Has any previous petition been filed? \_\_\_\_\_ If granted, give date and variance number: \_\_\_\_\_
- 6) What specific section of the Zoning Regulations are you seeking a variance of: \_\_\_\_\_

If the variance is requested for setbacks, lot area, height or use:

Front Rear Side \_\_\_\_\_ Required: \_\_\_\_\_ Existing: \_\_\_\_\_ Proposed: \_\_\_\_\_  
Front Rear Side \_\_\_\_\_ Required: \_\_\_\_\_ Existing: \_\_\_\_\_ Proposed: \_\_\_\_\_  
 (Example: "Required" - side setback 40' and "Existing" - North side setback 30' and "Proposed" North side setback 15')

- 7) Reason for the variance (describe project briefly including dimensions): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- 8) List the reason(s) why the variance (or appeal) should be granted, stating clearly the exceptional difficulty or hardship:  
 \_\_\_\_\_  
 \_\_\_\_\_

(Attach additional sheet if necessary)

I (we) certify that all the information in this application and in the attachments submitted is accurate and complete to the best of my (our) knowledge and belief. I (we) understand that a variance does not waive the requirements for other permits. If a variance is granted, I (we) will comply with all permit requirements of the Town of New Milford. **I (we) have carefully read and understood the instructions, information and requirements contained in this application.**

\_\_\_\_\_  
Owner's signature (original required)

\_\_\_\_\_  
Applicant/Agent's signature (if different from owner)

# Town of New Milford

## Zoning Board of Appeals

### Supporting Documentation - Additional Requirements for Variance Application

**I. Please attach the following and check appropriate items to indicate submission:**

- 3 copies of an A-2 Survey or plot plan (showing all existing and proposed structures – see pg.1)
- A-2 Survey waiver requested (if setbacks are not involved)
- Exterior drawings/preliminary building plans (if construction is involved)
- Copy of current Tax Assessor field card (information can obtained from the Tax Assessor’s Office)
- Schedule A Legal Description (from most recent property deed, located in the Town Clerk’s Office)
- Agent letter of authorization if applicant is not the property owner
- Optional* photographs of the property

**II. Please list all abutting properties with owner names (use additional sheet if necessary):**

Address	Owner of Record	Tax map/lot

*It is the responsibility of the applicant, at their expense, to send notice of the hearing via certified mail-return receipt requested, to property owners abutting this parcel and directly across the street from this parcel, at least fifteen (15) days prior to the date of the hearing. All certified/return receipts must be surrendered at the time of the hearing to the ZBA.*

**III. Application fees to be submitted with the application:**

**The check for the application fee should be made payable to the Town of New Milford**

- Residential - \$160.00 (includes \$60.00 state fee)
- Commercial - \$210.00 (includes \$60.00 state fee)
- Appeal the decision of the ZEO - \$160.00 (includes \$60.00 state fee)

**The check for the land recordation fee should be made payable to the New Milford Town Clerk**

- Land Record fee - \$53.00 (separate check required)

**IV. Required Water Company Notification**

Under Sections 8-3i and 22a-354c of the Connecticut General Statutes, when your property is located in a watershed area, you are required to notify the corresponding water company that you have applied to the ZBA for work to be done within that watershed area. Under PUBLIC ACT 06-53, the Commissioner of the Connecticut Department of Public Health must be notified for any project located within a public water supply aquifer protection area or watershed area. These notices must be sent by certified mail, return receipt requested, within seven days of submitting an application to the ZBA. A map indicating the location of the Aquifer Protection Areas, Public Water Supply Reservoirs and Public Water Supply Watershed is available in the Zoning Office.

*I (we) have carefully read and understood the instructions, information and requirements contained in this application.*

\_\_\_\_\_  
Owner’s signature (original required)

\_\_\_\_\_  
Applicant/Agent’s signature (if different from owner)