

## Applying for a Variance?

Items needed to submit your application to the Land Use Agency				
Notice of Appeal Application - 2 Pages (3 original copies)				
Letter of Hardship (3 original copies)				
A-2 Survey outlining exact dimensions of request (3 stamped copies)				
Check for \$210 payable to <i>Town of Newtown</i>				
You will be given a docket number and hearing date/time/location once all the above is received by the Land Use clerk.				

Before your public hearing
Obtain a list of abutters within a 500' radius from your property. This list can be found on the Town website under GIS. Add the abutters' addresses to the Post Office form "PS Form 3665"
Mail the "Notification Form" to each abutter on "PS Form 3665" at least 10 days prior to hearing date
Complete Affidavit and have notarized
The Land Use Agency will run your notice in the paper for two weeks prior to hearing date

Public Hearing
The Board will ask you to:
State your name and address - bring a surveyor/engineer/attorney if you wish
Submit "PS Form 3665" and Affidavit for the record
Explain your Hardship
Explain plans for the property
The Zoning Board of Appeals will typically vote to approve or deny at the meeting unless
they require further deliberation or information from the applicant
Appeal period is 15 days past publication of decision in the Newtown Bee

Upon Approval
The Applicant must file a "Notice of Grant" to the Town Clerk for a fee of \$60.00.
The Land Use Agency will send an approval letter to the Applicant
The Land Use Agency will post a legal notice in the paper

#### Town of Newtown Regulations:

"12.01.220 **Variances** to vary the strict application of any of the requirements of these Regulations \*in the case of an exceptionally irregular, narrow, shallow, or steep lot or other physical conditions for which strict application would result in exceptional difficulty or unusual hardship that would deprive the owner of the reasonable use of the land or building involved..."

# TOWN OF NEWTOWN Zoning Board of Appeals NOTICE OF APPEAL - APPLICATION FOR HEARING

Before filling in this form please read carefully the accompanying instructions. When completed, deliver or mail three (3) signed copies, each with all detailed information attached thereto to:

Secretary c/o The Zoning Officer Zoning Board of Appeals Newtown Municipal Offices 3 Primrose Street Newtown, CT 06470

DO NOT WRITE IN THIS SPACE				
Date Rec'd	Docket			
Fee Paid	Date Adv			
Date Hear	By			

	Newtown, C1 00470
Α.	APPLICANT (Please print or type):
	Name (s)
	Mailing Address
	Telephone
В.	PURPOSE OF APPLICATION (Use only one of the following four numbered sections)
	1 ( ) To Appeal for Correction of Alleged Error Fee: \$310.00
	To appeal for correction of alleged error in a decision of the Zoning Officer who on (date)
	did ( ) deny or ( ) grant a permit by, requesting
	( ) Explanatory Statement to be attached by Applicant. Statement should indicate in detail what action is desired and the reasons therefore as required by Chapter 124, Section 8-7 of the General Statutes, 1958 Revision, as amended. Maps, plans, photographs, etc. should be included, if needed, to clarify the question at issue.
	2 ( ) To Apply for Variance Fee: \$210.00
	To apply for a variance of section (s) of the Zoning Regulations
	of the Town of Newtown so as to permit

- ( ) Explanatory statement, to be attached by applicant statement, should indicate exactly what is proposed as shown by maps, plans, photographs, etc. It should include specific statements on the following three requirements as specified in Chapter 124, Section 8-6 of the General Statues, 1958 Revision, as amended:
  - a. That "literal enforcement of such regulations would result in exceptional difficulty or unusual hardship,"
  - b. That this is due "to conditions especially affecting such parcel but not affecting generally the district in which it is situated," and
  - c. That the variance sought is "in harmony with the general purpose and intent" of the Zoning Regulations of the Town of Newtown.

## C. LOCATION OF AFFECTED PREMISES: Zoning District: Street or Road Address: Aerial Survey Map (in Tax Assessor's office): Map Block Lot Subdivision Map (if any): Map No.\_\_\_\_\_\_Lot (s) No.\_\_\_\_\_ Is the property located in the Aquifer Protection District? Yes\_\_\_\_\_No\_\_\_ Owner of Property (if different from applicant): Mailing Address \_\_\_\_\_ D. PREVIOUS APPEAL(S) OR APPLICATION(S): List all prior appeals which relate to this property in whole or in part. If this is the first, please enter none. Date \_\_\_\_\_ Date \_\_\_\_\_ Docket No.\_\_\_\_\_ Docket No.\_\_\_\_ Docket No.\_\_\_\_ E. DESIGNATION OF AGENT OR ATTORNEY It is not necessary for an applicant to be represented by either an agent or an attorney. A property owner should be able to present his or her own case. However, if an agent or attorney is retained, the fact must be so stipulated below. I (We) hereby designate the following individual(s) to act for me (us) at any hearing held in response to this application: () Agent () Attorney As Name\_\_\_\_ Address \_\_\_\_\_ \_\_\_\_\_Signature\_\_\_\_\_ Date\_\_\_\_\_ ( ) Agent ( ) Attorney As Name\_\_\_\_ Address\_\_\_\_ Date Signature

#### **F. DECLARATION** (to be signed by all applicants):

I (We) hereby declare that all information in the foregoing application, and in attachments submitted herewith, is accurate and complete to the best of my (our) knowledge and belief.

Date	Signature
Date	Signature

#### NOTIFY ABUTTERS OF PUBLIC HEARING

- A. Notify all abutters by mail who own land within a 500' radius of the parcel.
- B. Obtain a list of abutters which can be found on the Town website under Technology/GIS.
  - a. Go to newtown-ct.gov
  - b. Click on Government
  - c. Click on Tax Assessor
  - d. Click on Maps (in the blue on the left-hand side)
  - e. Click on Interactive Mapping
  - f. Click on Search (in the graphic and property information application toolbar)
  - g. Enter house number
  - h. Select street name
  - i. Click on Find
  - j. Click on Zoom to GIS
  - k. Click on the highlighted parcel
  - 1. Locate Generate Mailing List and enter required number of feet (500)
  - m. Click on Submit
- C. Add the abutters' addresses to Post Office Form "PS Form 3665" and have the form stamped and processed at the Post Office.
- D. Mail the "Notification Form" to each abutter at least ten days prior to public hearing date.
- E. Submit "PS Form 3665" and the notarized "Affidavit" at or before the public hearing.

#### **NOTIFICATION FORM**

Dear			
Be advised that			
	(Applicar	ut)	
	pecial Permit, or Certificate	for a property of Location Approval)	located at:
	(Property add	dress)	
(Map)	(Block)	(Lot)	
The proposal is for:			
The Newtown Zoning Boar	d of Appeals will conduc	et a public hearing on this proposa	ıl.
Date:		Time:	
You are being notified beca	use your property is with	in 500 feet of the proposed applic	cation.
		peals Office, Land Use Agency, N Γ 06470. The Land Use Agency r	

(To be completed by applicant)

contacted at 203-270-4276.

### **AFFIDAVIT**

Application of						
Application Description:						
Th	e undersigned, being duly sworn, deposes and says:					
1.	1. I have mailed a notice of the time and place of the public hearing scheduled for the subject application, as required by the Town of Newtown Zoning Board of Appeals to persons who are owners of land, which is included in or within 500 feet of the land, which is the subject of the hearing.					
2.	The date of the mailing of such notice was	20				
3.	3. The names and addresses of the required property owners were determined by reference to the records of the Newtown Tax Assessor.					
	Applicant or Designated Agent					
Sw	vorn to and subscribed before me thisday of	20				
	ommissioner of the Superior Court otary Public					
$M_{2}$	y Commission Expires					



## **Certificate of Mailing — Firm**

TOSTIAL SERVICE 8							
Name and Address of Sender	TOTAL NO.	TOTAL NO. of Pieces Received at Post Office™	Affix Stamp Here	Э			
	of Pieces Listed by Sender of Pieces Received at Post Office™		Affix Stamp Here Postmark with Date of Receipt.				
				•			
	Postmaster, per (name of receiving employee)						
LICDOR Translation Number							
USPS® Tracking Number	Ad (Name Street City	dress	Postage	Fee	Special Handling	Parcel Airlift	
Firm-specific Identifier	(Name, Street, City,	State, and ZIP Code™)	_				
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#### Instructions for Certificate of Mailing — Firm

This service provides evidence that the mailer has presented individual items to the Postal Service™ for mailing, and is available for the following products:

- Domestic services: First-Class Mail®, First-Class Package Service®, Priority Mail®, Media Mail®, Library Mail, Bound Printed Matter, Merchandise Return Service, Parcel Return Service, and USPS Retail Ground™.
- International services: First-Class Mail International<sup>®</sup> (unregistered items), First-Class Package International Service<sup>®</sup> (unregistered items), Free Matter for the Blind, and Airmail M-bags<sup>®</sup>.

The following instructions are for the preparation and use of PS Form 3665, Certificate of Mailing – Firm (including USPS-approved facsimiles):

- 1. Complete and print all forms in ink or ball point pen.
- 2. Enter the name and address of the sender at the top of the form.
- 3. Enter a complete return address on each article.
- 4. Ensure the articles are properly packaged.
- 5. In the appropriate column, enter the applicable postage and fees.
- Insert a firm-specific identifier or account number if desired. (This number is for the sender's use only, and the Postal Service will not use it for identification.)
- 7. When describing and listing three or more individual pieces but not presenting the pieces in the order shown on the sheet, consecutively number each entry line on the sheet and number each piece to show both the corresponding sheet and line number.
- 8. Enter the total number of articles in the proper space at the top of the form.
- 9. Obliterate all unused portions of the "Address" column by drawing a diagonal line through the unused portion on the form.
- 10. When the number of articles presented exceeds the allotted space on the form, use multiple sheets, and in the provided blank spaces in the lower left of the form, number them consecutively to show sheet number and total number of sheets (such as "Page 1 of 4," "Page 2 of 4," etc.).

- 11. Present PS Form 3665 and the mailing as follows:
  - When the mailing has fewer than 50 mailpieces and less than 50 pounds, present the form and mailing at a retail Post Office™ location.
  - When the mailing has at least 50 mailpieces or at least 50 pounds, present the form and mailing at a business mail entry unit (BMEU) or USPS-authorized detached mail unit (DMU).

**Privately Printed Forms:** The Postal Service allows mailers to use USPS-approved privately printed or computer-generated firm sheets that are nearly identical in design elements and color to the USPS-provided PS Form 3665. See DMM 503 for details on the approval process.

The mailer must retain the original written approval granted by the Postal Service as evidence that the privately printed facsimile of PS Form 3665 has been approved by the Postal Service. The Postal Service does not retain records on the facsimile approvals. A mailer using privately prepared forms must periodically verify them against the USPS-provided version and, if necessary, make routine updates and obtain approval of the updated facsimile form.

A mailer using an approved privately printed form and wanting the form sheets postmarked by the Postal Service must present the forms with the articles to be mailed at a Post Office facility. The forms become the mailer's only receipt (the Postal service does not retain a copy).