



# TOWN OF NORTH BRANFORD

TOWN HALL 909 FOXON ROAD NORTH BRANFORD, CONNECTICUT 06471-1290  
Building Department (203) 484-6008 Engineering Department (203) 484-6009  
Planning & Zoning (203) 484-6010  
Department Fax (203) 484-6018

## TOWN OF NORTH BRANFORD

### APPLICATION TO THE

### ZONING BOARD OF APPEALS

#### INSTRUCTIONS:

**Submit** the following:

1. Application Form: 1 original and 9 copies
2. Site Plan/Plot Plan\*: 10 copies drawn to scale (\*see attached plot plan checklist)
3. Architectural Plans (if required): 10 copies
4. Any additional information necessary (i.e. floor plans, etc.).
5. Fee: Check made payable to the Town of North Branford (see attached fee schedule).
6. Certified receipts for abutters (submit prior to meeting).

#### APPLICANT MUST:

1. **NOTIFY** the Regional Water Authority if your property falls within the watershed area within seven (7) days of application to the Town. Application to the RWA is attached. Submit copy to the Planning office also.
2. **POST** "Public Hearing Sign" *fifteen (15) days* prior to the meeting (sign provided to you by the Town).
3. **MAIL** abutters notices (via certificate of mailing) at least *fifteen (15) days* prior to the meeting (see sample attached). Verify owner info is correct on list prior to mailing letters.
4. **RETURN** certified receipts to the Planning Office prior to the meeting.

Date Filed: \_\_\_\_\_

Appl. # \_\_\_\_\_

**TOWN OF NORTH BRANFORD**

**APPLICATION TO THE ZONING BOARDS OF APPEALS**

1. The undersigned requests that the Town of North Branford's Zoning Board of Appeals grant the following (check one):

- a. Variance \_\_\_\_\_
- b. Recertification of Use \_\_\_\_\_
- c. Reverse/Modify Decision of Zoning Enforcement Officer \_\_\_\_\_
- d. Approval of Location \_\_\_\_\_
- e. Other (specify): \_\_\_\_\_

2. Address of Property: \_\_\_\_\_  
Present Zone: \_\_\_\_\_ Map \_\_\_\_\_ Lot \_\_\_\_\_

3. Owner of Property: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Cell #: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

4. Applicant/Agent: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Cell #: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

5. Is the lot conforming? Yes \_\_\_\_\_ No \_\_\_\_\_  
Describe the nonconformity: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Does the property have a nonconforming use, building or structure?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
Describe the nonconformity: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Section of Zoning Regulations for variance:  
a. \_\_\_\_\_  
b. \_\_\_\_\_  
c. \_\_\_\_\_  
d. \_\_\_\_\_  
e. \_\_\_\_\_

8. What is the extent of the appeal requested:  
a. \_\_\_\_\_  
b. \_\_\_\_\_  
c. \_\_\_\_\_  
d. \_\_\_\_\_  
e. \_\_\_\_\_

9. Describe the ground of the appeal, stating the hardship: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Does the property lie within 500 feet of another Town?  
Yes \_\_\_\_\_ No \_\_\_\_\_

11. Has a previous application been filed? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, Application # \_\_\_\_\_ Date of ZBA decision \_\_\_\_\_  
Application # \_\_\_\_\_ Date of ZBA decision \_\_\_\_\_

I hereby certify that all statements contained herein and attached exhibits are true.

\_\_\_\_\_  
Signature of Owner                      Date

\_\_\_\_\_  
Signature of Agent                      Date

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Print name

Office use only

Date Filed: \_\_\_\_\_

Date of hearing: \_\_\_\_\_

Fee Received: \_\_\_\_\_

**TOWN OF NORTH BRANFORD**

**CERTIFIED PLOT PLAN CHECKLIST**

- a. Name of applicant and property owner \_\_\_\_\_
- b. Area of lot, dimensions, radii and angles or bearings of all lot lines \_\_\_\_\_
- c. Street address and assessor's map and lot number \_\_\_\_\_
- d. North arrow and graphic scale \_\_\_\_\_
- e. Height, dimensions, use, floor area, ground coverage, and location of all Buildings and other structures \_\_\_\_\_
- f. Locations, area, and dimensions of off-street parking and loading spaces, curbcuts, driveways, easements, and right-of-ways \_\_\_\_\_
- g. Dimensions of all setback lines observed by buildings and structures \_\_\_\_\_
- h. Location of any on-site sewage disposal system, water supply well, or waterline \_\_\_\_\_
- i. Signs and other facilities and improvements that are subject to provisions of these Regulations \_\_\_\_\_
- j. Any wetlands, watercourses, 25 year flood line, 100 year flood line, and flood way boundary lines \_\_\_\_\_
- k. When property is located in flood-prone areas including existing and proposed site grades, contours and elevations, base flood elevation data, top of foundation elevation, finished floor elevation, and any proposed watercourse relocation \_\_\_\_\_
- l. Additional information needed to determine compliance with the Regulations \_\_\_\_\_

Note: Plot plan accompanying applications which pertain to a nonconforming building or structure or a nonconforming lot shall be prepared and certified as an A-2 map by a licensed land surveyor or engineer.

Signature of Owner/Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**SAMPLE**

**ZBA NOTIFICATION LETTER**

The owner of the parcel of land known as \_\_\_\_\_  
has submitted an application to appear in front of the North Branford Zoning Board of Appeals at  
7:00 p.m. on \_\_\_\_\_ at the North Branford Town Hall, 909 Foxon Road,  
North Branford, Connecticut. In accordance with Section 61 of the North Branford Zoning  
Regulations it has been determined that you own property, which falls within 100 feet of this  
location and are therefore being notified.

The applicant has requested the following:

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\_\_\_\_\_  
Property Owner's Name

\_\_\_\_\_  
Applicant's Name

Questions can be directed to the Building Department / Zoning Enforcement Officer at  
(203) 484-6010

South Central Connecticut Regional Water Authority  
90 Sargent Drive, New Haven, Connecticut 06511-5966 203.562.4020  
<http://www.rwater.com>

Revised 04/14/2011

Public Water Supply Watershed/Aquifer  
Project Notification Form  
For The  
South Central Connecticut Regional Water Authority

REQUIREMENT:

All applicants before a municipal Planning and Zoning Commission, Inland Wetlands Commission, or Zoning Board of Appeals for any project located within a public water supply watershed are required by Public Act 89-301 (Sections 8-3i and 22a-42f of the Connecticut General Statutes) to notify the affected public water utility by certified mail within 7 days of the application.

GENERAL INFORMATION:

Maps showing the location of Regional Water Authority (RWA) watershed boundaries are on file with municipal planning and zoning, and inland wetlands staff, and Town Clerks. The applicant's notification to the RWA should include the information requested on pages two through four. The RWA may request additional information if it is determined that a more detailed review is necessary. Any questions should be directed to (203) 401-2741, or (203) 401-2743.

Please mail this completed form and attachments to:

Environmental Analysts  
Environmental Planning Department  
Regional Water Authority  
90 Sargent Drive  
New Haven CT 06511



1. Applicants are requested to submit any information that was included in the application to the municipality including: site plan, project narrative, sediment and erosion control plan and drainage calculations if applicable.

2. Project address \_\_\_\_\_ Town \_\_\_\_\_

3. Application for:  Planning and Zoning  Inland Wetlands  Zoning Board of Appeals

4 Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Waste Water Disposal:  Septic System  Public Sewer  None

6. Water Supply:  Private Well  Public Water

7. Heating Fuel:  Oil  Gas Other \_\_\_\_\_

**Applications involving additions or modifications to single family residences or applications with no site disturbance and no storage or use of hazardous chemicals skip to item 20.**

8. Total acreage of project site \_\_\_\_\_

9. Total acreage of area to be disturbed including structures, additions, paving, and soil disturbance  
\_\_\_\_\_  
\_\_\_\_\_

10. Percent of existing impervious surfaces including buildings, roads and pavement \_\_\_\_\_

11. Proposed increase in impervious surfaces \_\_\_\_\_

12. Number of **existing and proposed** floor drains or sump pumps and their point of discharge  
e.g. sanitary sewer, holding tank, or ground  
\_\_\_\_\_  
\_\_\_\_\_

12. Are there any wetlands or watercourses on the property? If so, describe  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



14. Brief description of **existing and proposed** stormwater management system, including roof drainage, paved areas etc., and discharge points e.g. municipal system, drywells, streams, vegetated areas, detention basins etc. Attach drainage plans and calculations if available

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16. List of **existing and proposed** underground or above-ground storage tanks including age, capacity and contents

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17. List of potentially harmful chemicals stored or used on property (**existing and proposed**) and typical onsite volumes, including but not limited to petroleum products, lubricants, solvents, detergents, and pesticides

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18. Describe any wastes generated and their means of disposal \_\_\_\_\_

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20. Contact Information:

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_  
Name of Person Completing Form

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**TOWN OF NORTH BRANFORD**

**THE FOLLOWING APPLICATION FEES SHALL BE CHARGED BY THE  
ZONING BOARD OF APPEALS**

**EFFECTIVE OCTOBER 1, 2009**

<b>CLASSIFICATION</b>	<b>APPLICATION FEE*</b>	<b>STATE ED FEE</b>	<b>TOTAL FEE (includes 2 variances)</b>	<b>EACH ADDITIONAL VARIANCE</b>
<b>1. RESIDENTIAL</b>	\$115.00	\$60.00	\$175.00	\$50.00 / for each additional variance
<b>2. COMMERCIAL</b>	\$120.00	\$60.00	\$180.00	\$50.00
<b>3. INDUSTRIAL</b>	\$130.00	\$60.00	\$190.00	\$50.00

\* Application fee includes advertising cost.