

Fee \$130.00
(Variance)
Includes all State Taxes

ZBA1
CITY OF MIDDLETOWN
ZONING BOARD OF APPEALS
MUNICIPAL BUILDING, DEKOVEN DRIVE, MIDDLETOWN, CT 06457

APPLICATION FOR VARIANCE FROM THE MIDDLETOWN ZONING REGULATIONS

DATE _____

OWNER _____ ADDRESS _____

APPLICANT _____ ADDRESS _____
(if other than owner)

SUBJECT PROPERTY _____ ZONE _____
(Street Address)

OWNER'S DEED REFERENCE: VOL. _____ PAGE _____ Attach a legal description of the property

The undersigned hereby applies for a Variance of Section(s) _____

This application relates to: _____ USE _____ AREA _____ YARDS _____ HEIGHT _____ BUILDING LINE
_____ SIGNS _____ A PROPOSED BUILDING _____ AN EXISTING BUILDING _____ OTHER (Check proper one)

If work constitutes an alteration, conversion or extension to an existing building and/or non-conforming building or use, describe briefly: _____

Has any previous application been filed in connection with this property? _____ When? _____
Is hardship claimed? _____ If so, what is the specific hardship? _____

NOTICE: The clerk cannot accept an application unless signed, all required information is provided, all required items attached and fee paid. The following must be attached.

(a) A legal description of the subject property; and (b) A survey of the subject property prepared by a Connecticut registered land surveyor with the surveyor's seal and a certification that it is substantially correct to the degree of accuracy shown thereon, showing the boundaries of the subject property, existing and proposed structures and other improvements and all zoning lines pertinent to all boundaries.

Attach additional sheets, if necessary.

A Certification of Grant of Variance with legal description of the property attached must be recorded in the Middletown Land Records at the owner's expense before a variance can be effective.

The undersigned hereby represents that all the above statements and the statements contained in any items attached or submitted herewith are true to the best of my knowledge and belief.

Signature of Owner

Signature of Applicant if other than owner.
State interest in premises (Lessee, etc.)

Telephone No. _____

Telephone No. _____