



Planning Department · Hamden Government Center  
2750 Dixwell Avenue · Hamden, CT 06518  
Phone (203) 287-7070 Fax (203) 287-7075  
www.hamden.com

**TOWN OF HAMDEN  
ZONING BOARD OF APPEALS  
VARIANCE APPLICATION**

**INSTRUCTIONS**

Please note the list of the materials that must be submitted to the Zoning Board of Appeals. It is your responsibility to provide all of this information. While Town staff will be happy to answer your questions, they are not responsible for preparing the information or assuring its accuracy. The Hamden Zoning Regulations are available on-line at [www.hamden.com](http://www.hamden.com).

**DEADLINE FOR APPLICATIONS:**

Completed applications must be submitted **by 3:00 pm on the 15<sup>th</sup> of the month** to the Planning Office, 3<sup>rd</sup> Floor, Hamden Government Center, 2750 Dixwell Avenue, Hamden, CT 06518 in order to be put on the agenda for the meeting **the following month**. The regular meetings of the Zoning Board of Appeals are held on the third Thursday of each month.

**APPLICATION FEE SCHEDULE (subject to change)**

Residential (1-3 family dwelling)	\$160.00
Commercial/Industrial/Multi-family	\$300.00
Use Variance	\$360.00
Appeal of ZEO Decision	\$250.00
Re-advertising fee upon applicant's request for postponement after project has been advertised, unless there are fewer than five members of the Board present	½ of the original application fee

***NOTE: THE APPLICANT OR HIS/HER AGENT MUST BE PRESENT AT THE HEARING.***

**SUBMISSION REQUIREMENTS**

One (1) original and nine (9) copies of all documents must be submitted. **An application packet is not complete until all of the required materials are submitted.**

**All maps must be folded** not to exceed the dimensions of 11½ x 9 ½". Fold maps so that the title block is face up.

Any change(s) of use, installation or expansion on a property with a **septic system and/or well water require approval by the Quinnipiac Valley Health District (QVHD.)** Receipt of approval must be submitted along with this application. QVHD can be reached at:

1151 Hartford Turnpike  
North Haven, CT 06473  
Phone 248-4528  
Fax 248-6671

**Notification to the Regional Water Authority (RWA)** – Please complete the attached RWA Notification Form and **send by certified mail to the address below**. This notice must be mailed within seven (7) days of the date of the application. Documentation of mailing must be provided to the Hamden Planning Office.

Environmental Analysts,  
Environmental Planning Department  
Regional Water Authority  
90 Sargent Drive  
New Haven, CT 06511  
203-401-2741

**Notification to the CT Department of Public Health** --All applicants for any project located within a public water supply aquifer or watershed area are now required by Public Act No. 06-53 of the CT General Statutes to notify The Connecticut Commissioner of Public Health of the proposed project within seven days of filing. The instructions are on the last page of the application package.

### **Installation of Sign(s) Informing the Public of Public Hearing**

This application requires a public hearing. Therefore, per Section 726.5.3, the applicant must place a sign or signs on the affected property, clearly visible to passers by, giving notice of the proposed public hearing. Where the property is a corner lot, a sign shall be placed on both frontages of the property.

The sign(s) is to be placed at or near the street line or traveled way and shall be clearly visible to the general public. Weather permitting, the sign should be placed on a pole at a height between four and six feet. Alternatively, the sign may be placed on a fence, tree or structure. The sign (s), which is provided by the Planning Department, shall be installed by the applicant no less than 10 days before the hearing. The sign(s) should remain in place until after the Public Hearing has been completed.

Sign(s) are subject to a security deposit in an amount set by the Legislative Council.

An affidavit shall be presented at the public hearing by the applicant or his/her agent certifying that this sign was installed and maintained in accordance with the provisions of this section.

A photograph of each sign showing it installed on the site, should also be provided.

Failure to post and/or maintain said sign(s) shall be cause for the Commission to deem an application as incomplete.

## **DEMONSTRATION OF HARDSHIP AND PROHIBITIONS ON USE VARIANCES**

The following information excerpted from the Hamden Zoning Regulations is meant to assist you in the preparation of your variance application. Please refer to the Hamden Zoning Regulations (in the Planning Office or at [www.hamden.com](http://www.hamden.com)) for more complete information.

**Section 726.1.2 of the Zoning Regulations gives the Zoning Board of Appeals the powers and duty to vary the application of the Regulations as follows:**

*To determine and vary the application of the Zoning Regulations in harmony with the general purpose and intent and with due consideration for the Plan of Conservation and Development and for conserving the public health, safety, convenience, welfare and property values solely with respect to a parcel of land where, owing to conditions especially affecting such parcel, but not affecting generally the zone in which it is situated, a literal enforcement of the regulations would result in exceptional difficulty or unusual hardship so that substantial justice will be done and the public safety and welfare secured. Financial hardship alone shall not be considered an exceptional difficulty or unnecessary hardship.* (Emphasis added)

**Section 726.1.3 Places Strict Limitations on the Granting of Use Variances:**

*726.1.3.1 Purpose:*

*Pursuant to Section 8-6, Connecticut General State Statutes, and to be consistent with the purpose and intent of the Hamden Zoning Regulations, and to avoid spot zoning in contravention to the Hamden Plan of Conservation and Development, and to avoid actions that in essence establish new or amend existing Zoning Regulations, the Zoning Board of Appeals shall consider the statutory substantive requirements for variances.*

*726.1.3.2 Criteria for Use Variances*

**Use variances shall be granted only upon finding all of the following:**

- a. A literal enforcement of the Zoning Regulations would result in exceptional or unusual hardship; Financial hardship alone shall not be considered an exceptional difficulty or unnecessary hardship.*
- b. The hardship is not a self-inflicted hardship, resulting from a previous action by the applicant;*
- c. The applicant has demonstrated that no reasonable use of the property can be made for any use permitted in the applicable zone;*
- d. The applicant has demonstrated that (s)he has pursued all other alternatives available to him/her under the regulations;*
- e. The variance requested is the minimum variance necessary to allow a reasonable use of the land;*
- f. The applicant has demonstrated that the granting of the requested variance will have no adverse effect on surrounding properties with regard to health, safety, welfare or property values;*

*g. The applicant's request for a variance is consistent with the Comprehensive Plan of Conservation and Development, 2004, as it may have been amended from time to time.*

**726.1.3.3 All uses prohibited in the Zoning Regulations shall not be permitted by variance.**

**726.1.3.4 All applications where a use variance has been granted shall be subject to Special Permit approval by the Commission.**



ZBA # \_\_\_\_\_  
 Date of Filing \_\_\_\_\_  
 Fee \_\_\_\_\_  
 Date Paid \_\_\_\_\_  
 Receipt # \_\_\_\_\_

**TOWN OF HAMDEN  
 ZONING BOARD OF APPEALS  
 VARIANCE APPLICATION**

Property Address \_\_\_\_\_ Zone \_\_\_\_\_

- Spring Glen Village District
- Newhall Design District

Hamden Land Records (from Town Clerk's Office): Volume \_\_\_\_\_ Page \_\_\_\_\_

Applicant \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Town/Zip \_\_\_\_\_

Property Owner \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Town/Zip \_\_\_\_\_

Lessee \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Town/Zip \_\_\_\_\_

Agent/Attorney \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Town/Zip \_\_\_\_\_

Email Address of Primary Contact \_\_\_\_\_

\*This application is not complete unless signed by the owner **and** his/her agent (if applicable).

1. Variance Requested – State the Section Number from the Hamden Zoning Regulations that relates to the requested variance. State what your request is in relation to what is required. For example, "Section 220, Table 2.3: Applicant is asking for a 15 foot side yard where a 30 foot side yard is required."

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. What is the unique hardship applicable to the land (cannot be financial)? \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. Attach a **site plan** that is drawn to scale and includes the following:
  - A. Dimensions of the lot
  - B. Location of all existing and proposed structures on subject property
  - C. Elevation drawings for any structures over four feet high
  - D. Zone of adjacent properties
  - E. Location of existing structures on adjacent properties
  
4. Provide an **Assessor's Map** (from the Assessor's Office) of the property clearly showing:
  - A. Your property (clearly identified)
  - B. Nearest intersecting streets
  - C. All properties located within 100 feet of any portion of your property
  
5. Provide a **list of property owners within 100 feet** of any portion of your property including properties across streets. You can get this information from the Assessor's Office. This list should contain the property owner's abutting property address and home mailing address.
  
6. Provide stamped (not metered) **envelopes** addressed to all property owners (not tenants) within 100 feet (on abutters list from Assessor's Office) including one addressed to yourself. Address the envelopes to the property owner's mailing address rather than to the address of the property that abuts yours. The return address should read:

Zoning Board of Appeals  
 Hamden Government Center  
 2750 Dixwell Avenue  
 Hamden, CT 06518

7. Post the required sign(s) on the subject property at least ten days prior to the public hearing (see the instructions, page 2).
  
8. Pay the appropriate **fee** (fee schedule listed on the first page of instructions). How long have you owned/leased the property? \_\_\_\_\_
  
9. Please list any variances previously requested for this property and the outcome:  
 \_\_\_\_\_  
 \_\_\_\_\_
  
10. Has any application involving this property been submitted to the Planning and Zoning Commission? Yes / No If yes, what was its decision?  
 \_\_\_\_\_  
 \_\_\_\_\_

I hereby state that all the above information and any information contained in any papers submitted herewith are true and correct to the best of my knowledge and belief under penalties of false statements.

I understand that by applying I grant permission for a member or members of the Zoning Board of Appeals and staff to enter upon the subject premises for the purpose of making a visual examination of same.

11. Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_  
12. Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

### **NEXT STEPS IF YOU ARE GRANTED A VARIANCE**

1. There is a **15-day appeal** period starting the day after the legal notice of action taken is published in the New Haven Register. During this time, anyone who wishes to appeal the Board's decision may take his/her case to court. **We recommend waiting until after the appeal period to record the variance.**
2. The variance must be recorded with the Town Clerk (between 9:00 am and 4:00 pm) to become effective. There is a recording fee of \$43.00 (subject to change). **Request three copies of the recorded variance notification from the Town Clerk's Office.**
3. After filing the variance with the Town Clerk, **you must obtain a Zoning Permit from the Planning Office.** The Zoning Permit process takes 7 to 10 working days.
4. At the time you file your Zoning Permit, you will need the following items:
  1. A completed Zoning Permit Application
  2. One (1) original and two (2) copies of the plot plan or site plan
  3. One (1) original and two (2) copies of the floor plans
  4. One (1) original and two (2) copies of the elevation drawings
  5. One (1) original and two (2) copies of the recorded variance notification
  6. The Zoning Permit Fee

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 and three. 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 18.**

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

\_\_\_\_\_  
\_\_\_\_\_

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

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16. 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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17. Describe any wastes generated and their means of disposal

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18. Contact Information:

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

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

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

\_\_\_\_\_

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

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

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## NEW REQUIREMENT: NEED TO NOTIFY

### CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

#### Using Public Water Supply Watershed or Aquifer Area Project Notification Form

**Note:** All applicants before a municipal Planning Commission, Zoning Commission, Planning and Zoning Commission, Zoning Board of Appeals or Inland Wetlands Commission for **any project located within a** public water supply aquifer **or** watershed **area** are now required by Public Act No. 06-53 of the CT General Statutes to notify The Connecticut Commissioner of Public Health of the proposed project within seven days of filing.

To notify the Commissioner of Public Health, you must use the Online Notification Form, which you can find by doing the following:

11. Type in the following URL to access the website:  
[www.dir.ct.gov/dph/water/web\\_form.htm](http://www.dir.ct.gov/dph/water/web_form.htm) -- It will take you to the DPH Drinking Water Section web page and the form you need to complete.
12. Answer each question. For Steps 2.1 and 2.2., consult the map in the Planning & Zoning Department to see which one applies. **Note: If your property lies outside the public water aquifer and watershed areas, you do not need to fill out the online form.**
13. For Step 2.3, the PWSID number is: **0930011**
14. Print a copy of the completed form and submit to the Planning and Zoning Department with your application.
15. If you have any questions or problems concerning the website contact the Department of Public Health staff at: (860) 509-8000.