



**Town of Washington**  
**Zoning Board of Appeals**

P. O. Box 383  
Washington Depot, CT 06794  
Land Use Office: 860-868-0423

**ZBA USE ONLY:**

Appl. # ZBA- \_\_\_\_\_  
Date Rec'd \_\_\_\_\_  
Fees Paid \_\_\_\_\_  
Cash/Chk # \_\_\_\_\_  
Chk writer \_\_\_\_\_

**PETITION FOR SPECIAL EXCEPTION for Expansion of Nonconforming Dwelling**

**APPLICANT INFORMATION**

(If there are two or more applicants, provide the following information for each)

Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**PROPERTY INFORMATION**

Street Address: \_\_\_\_\_  
Assessor's Lot No.: \_\_\_\_\_ Zoning District(s): \_\_\_\_\_ Acreage of Property: \_\_\_\_\_  
Owner(s) of Record: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Record Owner(s) Deed is filed in the Land Records at: Vol. \_\_\_\_\_ Page \_\_\_\_\_

Is the property located within 500 feet of any town line? Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner (if Owner is not the Applicant)

**PRIOR APPEALS OR APPLICATIONS**

Have any variances been granted to this property in whole or in part? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, attach to this application a copy of each such variance and state the volume and page at which each such variance is recorded in the Land Records. Vol. \_\_\_\_\_ Page \_\_\_\_\_

## EXPLANATION OF REQUEST FOR SPECIAL EXCEPTION

In the spaces below, explain why the increase in nonconformity is needed. The explanation should include, at a minimum, a description of the proposed expansion and the special circumstances that make the special exception necessary. Attach additional sheets, if needed. **The applicant has the burden of proving to the board that the requested special exception is justified.** Refer to "Guidelines for Applications for a Special Exception for Expansion of a Nonconforming Dwelling" for guidance.

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## ADDITIONAL REQUIREMENTS

The applicant must submit:

1. **One original** and eight copies of a class "A-2" **survey** indicating all existing and proposed structures, septic systems, wells and water sources, easements, rights of way and legal restrictions, as well as all measurements and distances, needed to show the extent and nature of the requested special exception.
2. **Building and Elevation (if applicable) Plans** giving complete details with scaled measurements (see "Guidelines" for explanation).
3. **Filing fees** of \$150 and \$60, in separate checks, payable to the Town of Washington.
4. **Required by hearing date:** Evidence of certificate of mailing to the owners of all property located within 200 feet of the property involved in this application, notifying them of the date, time and location of the hearing and the nature of the requested special exception.
5. **Signed Letter of Representation** (if applicable)

## CERTIFICATION

**I hereby certify that the information I have provided in this application, including any attached sheets, is true, and I acknowledge that any false information may cause the denial or revocation of a Special Exception.**

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Signature of Applicant