# Town of Washington Zoning Commission

## **Special Permit Application**

A Special Permit is required for specific uses as listed in the Zoning Regulations for each Zoning
district.  Address of Proposed Use: 39 Pobash Hill road Dashlan CT
Name and Mailing Address of Property Owner: 222 central park South 34.86 Potash LLC graham Albert new york ny 10019
Name and contact information for authorized agent (if applicable – attach letter of authorization):  Eliot Johnson West Mountain Builders. 860 671 0770
30 west mountain RUAZ WAShibn CT 06793 Application is for (Check One):
New Special Permit - Fee: \$150
Proposed Use: Accessory Apartment in Attached garage
Zoning Regulation Section: 13.11.2
Zoning District: <u>№ 1</u> Historic District: □yes 🎮no
Attach a written statement with a Description of the Proposed Use. For new buildings include information such as the height and dimensions, for new businesses: type of business, hours of operation, number of employees, square footage of business area, etc. Also attach description of how the proposed use complies with each of the requirements of the specific special permit section listed above.
Attach site plan or survey map showing location of proposed or existing building, location of septic system, distance from each boundary line and from the septic system to the proposed structure, parking spaces, etc.
Attach a floor plan.
Modification of an existing Special Permit – Fee \$50
Approved Use:
Zoning Regulation Section:
Date of Approval:
Attach a written description of the proposed revision and why it is needed.

	Attach a site plan or survey map showing the location of the proposed revision with distances to property lines, well and septic system
	Attach a revised floor plan, if applicable
	Also required for ALL applications:
	X Health Department Approval:On file in Health Department Date:Date:Date:
	Application fee as listed above plus \$60 State Tax – Check payable to Town of Washington
	$\checkmark$ Letter of Authorization signed by the property owner if he will be represented by an agent
	Signed Mandatory Land Use Pre-Application Form re: Conservation Easements
	Proof of Inland Wetlands Commission approval, if applicable
	Proof of Zoning Board of Appeals approval and filing on the Land Records, if applicable
	Proof of Historic District Certificate of Appropriateness, if applicable
	Driveway sing-off from the First Selectman, if applicable
	Site plans and sketch plans shall meet the standards listed in Section 14 of the Zoning Regulations
	Additional documentation may be required depending on proposed use.
	This application must be submitted to the Land Use Office.
	The Undersigned hereby certifies that the information provided in this application, including its supporting documentation, is accurate and true.
	Signature of Property Owner:
	Telephone Number: 860 671 0770 Email Address: eliota west mounter
,	FOR OFFICE USE:  Received by: Swhite Date: 12-21-2020  17683  Amount Paid: 151 Check # 17687 Date: 12-19 Www. Witten by: W. Mountain Black
	Scanned V Building Index

1-5-21

### TOWN OF WASHINGTON

#### MANDATORY LAND USE PRE-APPLICATION FORM

This form is required for all health, wetlands, zoning, planning, and building applications except for interior or exterior work on existing buildings, which in no way expands or alters the footprint.

No planning, zoning, inland wetlands and watercourses, or historic district commission; health department; building; or zoning board of appeals application for a permit may be filed until the holder(s) of any conservation restriction or preservation restriction on the subject property has been notified. Please see the State legislation in its entirety, reprinted for your convenience on the reverse of this form, Public Act 05-124, Effective October 1, 2005.

Provide the legal name of the property owner(s) and the street address of the property for which one of the above applications will be submitted, then complete either section A or B below.

Property Owner(s) of Record 34 + 86 gotash LLC				
Subject Property Address 34 potrash Hill road	washylon ot			
A. I hereby certify that there are no conservation easements or restron the above-referenced property.				
Signature of Property Owner Agent	Date 12.19.2020			
Signature of Property Owner	Date			
B. There are conservation easements or restriction, or preservation restrictions on the above-referenced property.  The name of the easement or restriction holder is  The phone number of the easement or restriction holder is  You must obtain and attach one of the following:				

- (1) proof that the easement or restriction holder was notified not less than 60 days in advance of the application by certified mail, return receipt requested, of the property owner's intent to apply for a planning, zoning, inland wetlands and watercourses, or historic district commission; health department; building; or zoning board of appeals permit, or
- (2) a letter from the easement or restriction holder verifying that the application is in compliance with the terms of the easement or restriction.



December 19th, 2020

The town of Washington and whom it may concern,

We propose to create an accessory single bedroom/studio apartment in the existing attached two and a half car garage at 34 Potash Hill road in Washington Connecticut. The existing structure is approximately fifty years old and will require **no** changes to the exterior of the building or footprint. The existing garage bays will remain "as is" with the exception of fireproofing per code for living space above. The existing "shop" area will be renovated into a small kitchenette, the existing % bath will be renovated into a full bath. The existing staircase to the second floor will remain and existing second floor will be finished into a single large room. The apartment is intended to offer living space for visiting family.

Eliot Johnson West Mountain Builders Inc. Washington, Connecticut

/h\_



December 19th, 2020

The town of Washington and whom it may concern,

We authorize Eliot Johnson of West Mountain Builders Inc. to act as our *agent* for the sole purpose of permitting and representing our interests to the town boards and commissions of Washington Connecticut. Authorization of Eliot Johnson is relative only to the properties of 34 and 46 Potash Hill road in Washington Connecticut.

Graham Albert 34 & 46 Potash Hill Road LLC

Ch Mak



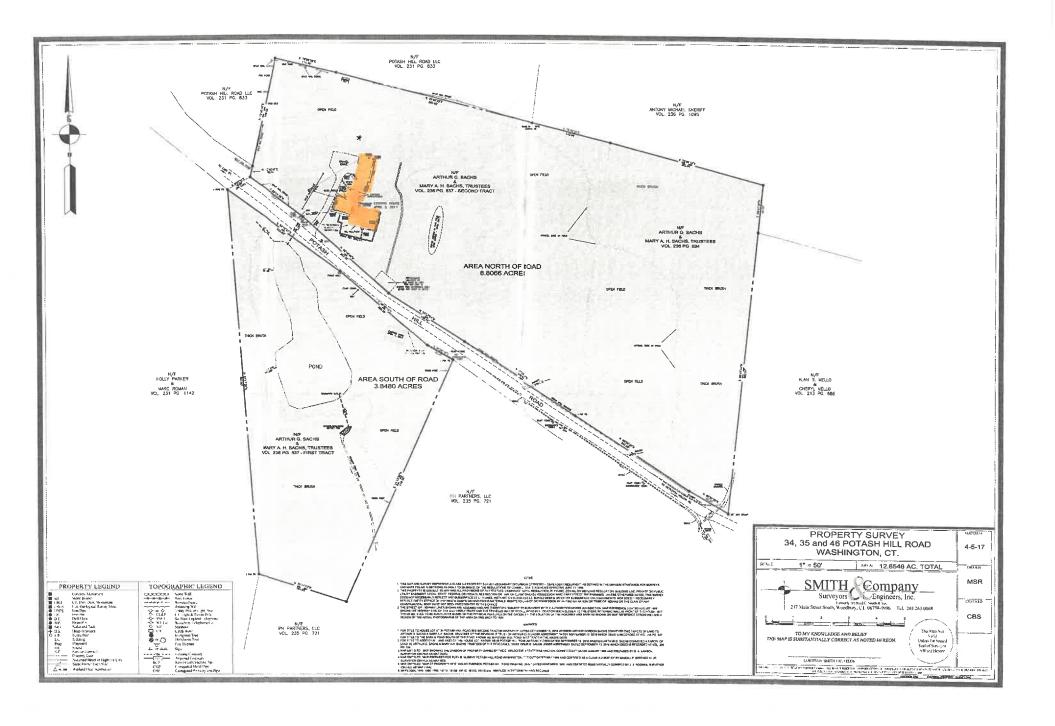
December 19th, 2020

The town of Washington and whom it may concern,

We fully intend to reside at our 34 Potash Hill residence throughout the duration of the special permit for an attached accessory apartment. Apartment usage will adhere to the spirit of the zoning regulations in section 13.11.2

Graham Albert 34 & 46 Potash Hill Road LLC

Oh Mak



#### SEPTIC SYSTEM INSTALLATION REQUIREMENTS

THE SEPTIC SYSTEM SHALL BE INSTALLED IN ACCORDANCE WITH STATE AND LOCAL HEALTH CODE REGULATIONS

KEEP ALL VEHICLE TRAFFIC OFF OF LEACHING FIELD AREA PRIOR TO SEPTIC SYSTEM INSTALLATION TO PREVENT OVER-COMPACTION OF NATURAL SOILS.

CALL 1-800-922-4458 "CALL BEFORE YOU DIG" TO LOCATE ALL UNDERGROUND UTILITIES IN THE SEPTIC SYSTEM AREA.

NOTIFY THE ENGINEER AND THE HEALTH DEPARTMENT AT LEAST 24 HOURS PRIOR TO STARTING CONSTRUCTION.

STRIP OFF ORGANIC MATERIAL AND TOPSOIL FROM LEACHING FIELD AREA AND SCARIFY THE GROUND SURFACE PARALLEL TO CONTOURS WITH BACKHOE BUCKET TEETH PRIOR TO SPREADING SEPTIC FILL.

SEPTIC FILL MUST BE BANK-RUN SAND AND GRAVEL WHICH CONFORMS TO THE FOLLOWING SPECIFICATIONS REQUIRED BY STATE HEALTH CODE:

1) THE FILL SHALL NOT CONTAIN ANY MATERIAL LARGER THAN THREE (3) INCHES

2) UP TO 45% OF THE DRY WEIGHT OF THE REPRESENTATIVE SAMPLE MAY BE RETAINED ON THE WASLEVE (THIS IS THE GRAVEL PORTION OF THE SAMPLE).

3) THE MATERIAL THAT PASSES THE #4 SIEVE IS THEN <u>REWEIGHED</u> AND THE SIEVE ANALYSIS STARTED.

4) THE REMAINING SAMPLE SHALL MEET THE FOLLOWING GRADATION

	PERCENT PASSING		
SIEVE SIZE	WET SIEVE	DRY SIEVE	
84	100%	100%	
610	70% - 100%	70% - 100%	
#4G	10% - 50%*	10% - 75%	
#10G	0% - 20%	0% - 5%	
#200	0% - 5%	0% - 2 5%	

MOTE PERCENT PASSING THE #40 SIEVE CAN BE INCREASED TO NO GREATER THAN 16% IF THE PERCENT PASSING THE #100 SIEVE DOES NOT EXCEED 10% AND THE #200 SIEVE DOES NOT EXCEED 6%.

THE CONTRACTOR SHALL PROVIDE A CERTIFIED TESTING LAB SIEVE ANALYSIS OF THE SEPTIC FILL TO THE ENGINEER AND HEALTH DEPARTMENT.

PLACE SEPTIC FILL AT THE PERIMETER OF THE LEACHING FIELD AREA. SPREAD SEPTIC FILL IN  $6^\circ$  -  $8^\circ$  LIFTS WITH TRACKED EQUIPMENT.

NOTIFY THE ENGINEER AND HEALTH DEPARTMENT 48 HOURS PRIOR TO THE FINAL SYSTEM INSPECTION (PRIOR TO BACKFILLING).

THE ENGINEER WILL PREPARE THE SEPTIC SYSTEM "AS-BUILT" PLAN

SEED AND HAY-MULCH THE LEACHING FIELD AREA AFTER FINAL GRADING.

### DEEP TEST PIT & PERCOLATION TEST DATA The Suchs residence 34 Potash Hill Road

Testing Conducted By: Suzanne Von Holt, R.S. (Washington Health Dept.) Test Date: June 5, 2017

TEST PIT: NO. 1

9" - 9" Fopoil
9" - 22" Yellow brawn fine sandy loant
22" - 79" Grey mettled hardpan

No ledge Mottles at 22" Groundwater at

No ledge Mottles at 19\* Groundwater at 24\*

TEST PIT: NO.3

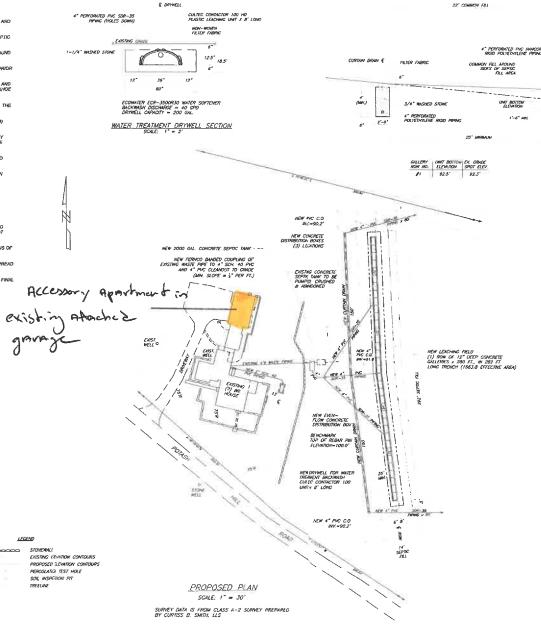
LEGEND

No ledge Mottles at 19" Groundwater at 24"

PERCOLATION HOLE: NO. I Hole depth: 19\*

READING 7-3/4" 7-3/4" \$-1/8" 8-5/8" 9-1/2" 9-3/4"

Percolation rate: 40.0 minutes/inch



14' SEPTIC FILL 15" COMMON FILL & GALLERY ROW #1

> 10° MIN. FILL EXTENSION HON-WOVEN FILTER FABRIC SOIL BARRIET

> > [ö LOTTING WASHED 1-1/4" STONE 12" DEEP PRECAST CONCRETE GALLERIES SEPTIC FILL CONSISTING OF SAND & GRAVEL WHICH COMPLIES WITH THE SIEVE ANALYSIS SPECIFICATIONS

LEACHING FIELD SECTION SCALE: 1" = 4"

> 4" SCH. 40 PVC PIPPIG WITO TANK 6" SCH. 40 PVC PIPPING (1/0" PER FT. WILL PITCH) 4" PVC SOR-JS PIPING ounce -APPROVED OUTLET BATTLE OUTER 2/3 104 (2) COMPARTMENT CONCRETE

> > SEPTIC TANK SECTION

SYSTEM DESIGN DATA

DWELLING DESIGN SIZE: (7) BEDROOMS

NO 100 GALLON CAPACITY OR LARGER BATHTUBS

THERE IS A KITCHEN SINK GARBAGE GRINDER

HEALTH CODE REQUIRED MINIMUM EFFECTIVE LEACHING (BASED UPON 30.1-45.0 MINUTES PER INCH PERCOLATION RATE) AREA = 1656 SQ. FT.

PROPOSED LEACHING FIELD CONSISTS OF (1) ROW OF 12" DEEP CONCRETE GALLERIES (RATED 59 SPALP) BY 280 FT. LONG, IN A 282 FT. TRENCH, TOTALLING 1683 8 OF FT. OF BEFECTIVE LEACHING AREA

MINIMUM LEACHING SYSTEM SPREAD

HF = 30 (MOTTLING AT 19", 8 1-10 0% GRADIENT)

FF = 2 75 (7 BEDROOM DWELLING)

FF = 2 0, 30 1-45.0 MM AN PERC)

MLSS = 30 x 2.75 x 3.0 = 247.5" < 20". TRENCH

THERE ARE NO WELLS OR SEPTIC SYSTEMS ON ADJACENT PROPERTY WHICH AFFECT THIS PLAN

NO BURIED OIL TANKS ARE PROPOSED

LOT SIZE: 5.0± ACRES

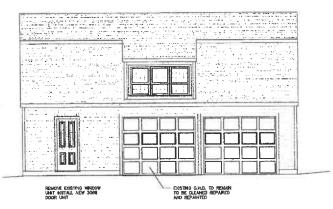
approved 9-14-17 TAX ASSESSOR MAP 2, BLOCK 4, LOT 13

PROPERTY OWNERS. ARTHUR G. SACHS, TRUSTEE MARY A.H. SACHS, TRUSTEE

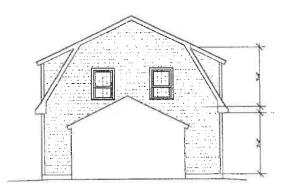
DSC 38-17



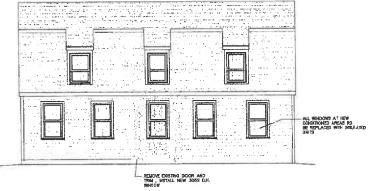




FRONT ELEVATION



LEFT SIDE ELEVATION



REAR ELEVATION

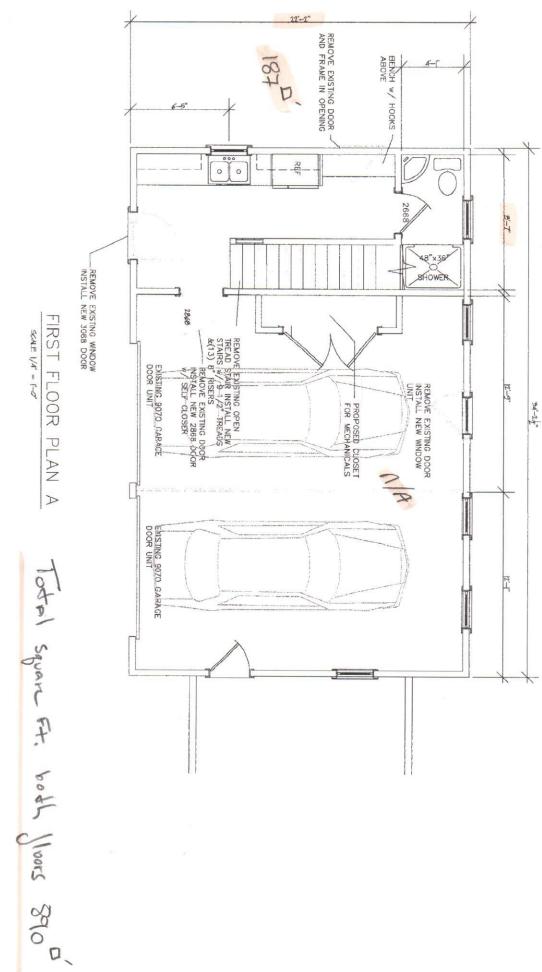


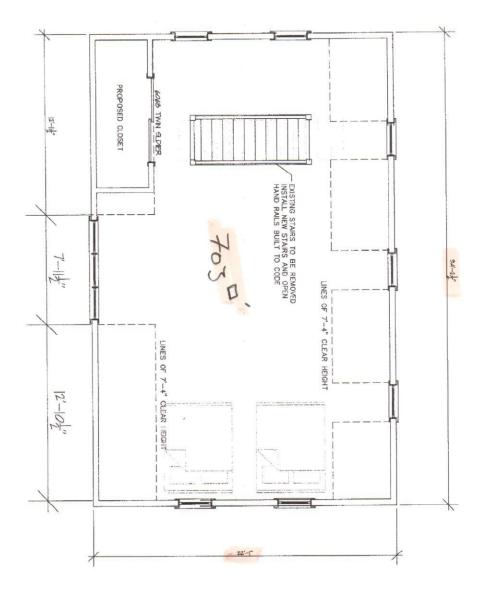
REMOVE ENISTRYS DOOR AND FRAME IN OPENING

LEFT SIDE ELEVATION



Apartment is attached to the main house and very much subordinate. Proposed Apartment Sq. Ft. 890 " Main house approx 3,500 D'





SECOND FLOOR PLAN