

ZBA VARIANCE or APPEAL APPLICATION

WESTPORT ZONING BOARD OF APPEALS Tel: 203-341-1030 Fax: 203-454-6145

INSTRUCTIONS for APPLICANT: For Questions visit P&Z office Daily 9:00-11:30.

Complete pgs 1 & 2 then, REVIEW & COLLECT ALL materials listed on pgs 3&4.

When all is collected DROP OFF to P&Z OFFICE DAILY between 8:30 & 4:00.

After the STAFF REVIEW is complete, a Hearing Date will be set. Please Review pgs. 5&7.

Note: Commercial projects may require Architectural Review Board approval, If needed. You MUST submit ARB application BEFORE going to ZBA Hearing.

OFFICE USE ONLY

Application#: _____

Submission Date: _____

Receipt Date: _____

Fee Paid: _____

1. Property Address: 30 Surf Road Zone: A
Commercial Property: or Residential:
2. Applicant's Name: Charles A. Mills, P.E. E-Mail: cam@mills-engineering.com
Applicant's Address: 68 Canterbury Ln, Wilton, CT 06897 Daytime Tel: 203-940-2411

NOTE: Below List Owner's Name (s) as appears on the DEED (No abbreviations) If more space needed submit list.

3. Property Owner's Name: Steven A. Kohn E-Mail: skohn@oponline.net
Property Owner's Address: 5 Elwil Drive Daytime Tel: 917-620-3839

4. Is this property on: a Septic System: or Sewer:
5. Is this property within 500 feet of any adjoining municipality? Yes No
6. Does this project involve the **demolition** of any **structures** that are **50 years old or more**? Yes No

7. Briefly Describe your Proposed Project:

Installation of an elevated public utility (transformer) above the BFE (AE 13) to serve two dwellings.

8. Will any part of any structures be demolished? No Yes - If **Yes** Attach a Demolition Plan:

It should be noted that a CAM approval (PZ-23-00615) was received on 12/5/23 to demolish the existing residence and to construct a new FEMA compliant single-family residence, attached garage, driveway, pool, and spa.

9. List each "**Regulation Section Number**" you are requesting a variance for: *i.e. (Sec 6-2 = Set back)*
See attached.

10. List any other variances that are requested to legalize any previous issues: *i.e. (Sec 11-5 Coverage for existing shed)*
Not applicable.

11. List the **PROPERTY HARDSHIP(s)** or **REASON(s)** why this Variance or Appeal should be granted, stating clearly the exceptional difficulty **REGARDING YOUR PROPERTY**. **Note: Financial Hardship will NOT warrant a variance approval see pg 5.**
See attached.

12. I hereby certify that the above information is correct and that the accompanying exhibits attached are true.
Charles A. Mills, P.E.

Applicant's Signature (If different than owner)

Owner's Signature (Must be signed)

If the applicant is unable to obtain the signature of the property owner, a letter of authorization by the property owner must be submitted.

TO BE COMPLETED BY OWNER/ APPLICANT

After all required materials are collected, DROP OFF to P&Z OFFICE DAILY between 8:30 & 3:00 ONLY.

BUILDING PLANS (TITLE) N/A
BY: _____ DATE _____ NUMBER of PGS. _____
REVISOR: _____ REVISED DATE _____ NUMBER of PGS. _____

SURVEY OR SITE PLAN (TITLE) Proposed Development Plan Prepared by for Steven A. Kohn
BY: Mills Engineering, LLC DATE 9/30/23 NUMBER of PGS. 8
REVISOR: _____ REVISED DATE 4/5/24 NUMBER of PGS. _____

GROSS LOT AREA: 26,612 sf **NET LOT AREA:** *(less 80% wetlands or steep slopes):* 24,464 sf

SETBACKS: Front / Side / Rear) (From Survey)

Existing: 45.5' / 15.6' / 36.8'
Required: 30' / 15' / 25'
Proposed: 3.75' / 12.2' / 47.9'

FLOOR AREA / FAR:

Existing: N/A
Allowed: N/A
Proposed: N/A

COVERAGE: Building / Total (From Survey)

Existing: 4,094 sf (16.7%) / 6,905 sf(28.2%)
Required: 3,669.6 sf(15%) / 6,116 sf(25%)
Proposed: 3,521 sf(14.3%) / 6,040 sf (24.5%)

PARKING:

Existing: N/A
Required: N/A
Proposed: N/A

HEIGHT: In Feet / # of Stories

Existing: 36.81 / 2
Required: 28.3 / 2
Proposed: 28.26 / 2

SIGNS:

Existing: N/A
Required: N/A
Proposed: N/A

ATTIC / HALF STORY:

Existing: N/A / Proposed: N/A

LANDSCAPING:

Existing: N/A
Required: N/A
Proposed: N/A

CRAWL SPACE - CELLAR - BASEMENT:

Existing: N/A / Proposed: N/A

NOTE: If you submit Revised Plans – You MUST SUBMIT A COVER LETTER listing EACH CHANGE & 9 COPIES.

REVISIONS FEE: Revised Plans, which require additional staff review ADDITIONAL FEE of HALF of original Appl. fee is REQUIRED.