

ZBA # 21-17

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TOWN OF ESSEX
LAND USE APPLICATION
PART ONE

PLEASE CHECK THE APPROPRIATE LINE(S) AND ATTACH THE APPROPRIATE APPLICATION(S):

SPECIAL EXCEPTION	<input type="checkbox"/>	<u>VARIANCE</u> /APPEAL	<input checked="" type="checkbox"/>
SITE PLAN REVIEW	<input type="checkbox"/>	APPROVAL OF LOCATION	<input type="checkbox"/>
INLAND WETLANDS PERMIT	<input type="checkbox"/>	REGULATION TEXT AMENDMENT	<input type="checkbox"/>
INLAND WETLANDS PERMIT - AGENT APPROVAL	<input type="checkbox"/>	ZONE CHANGE	<input type="checkbox"/>
	<input type="checkbox"/>	COASTAL SITE PLAN REVIEW	<input type="checkbox"/>
WETLAND PERMIT TRANSFER	<input type="checkbox"/>	MODIFICATION OF PRIOR APPROVAL	<input type="checkbox"/>
SUBDIVISION / RESUBDIVISION	<input type="checkbox"/>	SPECIAL FLOOD HAZARD AREA PERMIT	<input type="checkbox"/>

PROJECT DESCRIPTION:

BUILD AN ATTACHED 2 CAR GARAGE AT THE
END OF DRIVE WAY

STREET ADDRESS OF PROPERTY 55 BOOK HILL ROAD

ASSESSOR'S MAP 6 LOT 12-1 LOT SIZE 0.35 ac DISTRICT RU

APPLICANT KEVIN MURRESSEY

Email: KMURRESSEY@LAZ PARKING.COM PHONE 860-685-1109

APPLICANT'S AGENT (if any) _____
PHONE _____

ENGINEER.SURVEYOR/ARCHITECT ANGUS MACDONALD
PHONE 860-388-4671

Note:

- 1) TO BE ACCEPTED BY THE LAND USE OFFICE. THIS APPLICATION MUST BE COMPLETED, SIGNED, AND SUBMITTED WITH THE REQUIRED FEE(S) AND MAP(S) PREPARED IN ACCORDANCE WITH THE APPLICABLE REGULATIONS.
- 2) THE SUBMITTAL OF THIS APPLICATION CONSTITUTES THE PROPERTY OWNER'S PERMISSION FOR THE COMMISSION OR ITS STAFF TO ENTER THE PROPERTY FOR THE PURPOSE OF INSPECTION.
- 3) I HERBY AGREE TO PAY ALL ADDITIONAL FEES AND/OR ADDRESS SUCH COSTS DEEMED NECESSARY BY THE LAND USE OFFICE AS DESCRIBED IN PART THREE OF THIS APPLICATION.

Town of Essex
Zoning Board of Appeals
29 West Avenue, Essex, CT 06426

check # 3306

Application
Part Two

Date received by office 3/22/21 Application fee - \$40 + State fee - \$60 = \$100 ✓

Variance Application # 21-17
Appeal of a Decision by ZEO _____
Certificate of Location _____

APPLICANT (please print) KENEN MORRISSEY
ADDRESS 95 ROCK HILL ROAD ESSEX CT 06426
Street Town State Zip
Telephone _____
home work cell 860-685-1109

OWNER OF PROPERTY SAME
ADDRESS _____
Street Town State Zip
Telephone _____
home work cell

Deed Reference: Book 306 Page 568

Current use of the property SINGLE FAMILY HOME

Is any portion of property within 500' of another Town? NO

Is the property within the Gateway Conservation District? NO

If this application is for a variance(s) please complete the following section:

Variance(s) requested of the zoning regulations
SIDE SETBACK 40C, 40D, 61B
8 ft setback where 30 feet is required.

State the hardship on which the variance(s) are based. The hardship MUST be based on physical constraints of the land only.
ONLY SPOT WHERE GARAGE WILL FIT
ON PROPERTY

Have previous applications been made for this property? NO

Previous application #s and dates _____

If this application is to APPEAL an order of the Zoning Enforcement Official, please describe the nature of the order and basis for the appeal. Attach a copy of the ZEO's order.


If this application is for a Certificate of Location for Motor Vehicles Sales or Repair, please describe proposed business.

The following items must be included as part of this application:

- a. Fee of \$40, plus \$60 State Fee...payable to the Town of Essex
- b. 15 copies of the application, site plan (with setback lines) and sketch of the proposal.
- c. Copy of property deed
- d. Copy of ZEO's order (if applicable)
- e. K-7 Certificate (if applicable) No public hearing required.

Signature of applicant 

Date: 2/17/21

Signature of property owner 

Date: 2/17/21

