

File Copy

Town of Essex Zoning Board of Appeals

29 West Avenue, Essex, CT 06426

Variance Application

✓ # 823

Date received by office 10/19/22 Application fee - \$50 + State fee - \$60 = \$110 Pd.

Application # 22-14 Hearing Date Nov. 22, 2022

Premises: Street Address 27 NORTH MAIN ST. UNIT 5 ESSEX CT

Assessor's Map # 31 Lot # 19-2 Lot Area _____ ac

Zoning District RU Deed Reference: Book 348 Page 1107

Owner of Property CYNTHIA KASPER

Address 27 N. MAIN ST UNIT 5 ESSEX CT 00426
Street Town State Zip

Telephone 203-470-0249 Email: ckasper309@gmail.com
home work

Applicant (if not owner) _____

Address _____
Street Town State Zip

Telephone _____ Email: _____
home work

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) SUBMITTAL OF THIS APPLICATION CONSTITUTES THE PROPERTY OWNER'S PERMISSION FOR THE BOARD OR ITS STAFF TO ENTER THE PROPERTY FOR THE PURPOSE OF INSPECTION.
- 3) SUBMITTAL OF THIS APPLICATION CONSTITUTES THE PROPERTY OWNER'S AGREEMENT 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.

Signature (Authorized Agent) Cynthia Kasper Date 10/19/2022

Current use of the property Residential Business Farm Other _____

Is any portion of property within 500' of another Town? Yes No

Is the property within the Gateway Conservation District? Yes No

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

1. Variance(s) requested of the Essex Zoning Regulations
Check those that apply and write in sections that variances are requested

Section No.	Allowed/Required per the regulations	Existing	Requested
<input checked="" type="checkbox"/> 40C	No buildings within the setbacks		
<input checked="" type="checkbox"/> 40D	No improvements except in conformity		
<input checked="" type="checkbox"/> 40E	No change in the use of any land or improvement, in the location of any improvement, or in the size of shape of any lot or improvement except in conformity with the zoning regs.		

60B SETBACK REQUIRED IS 40 FEET (REQUESTING - 11.6")

(Please attach supplemental sheets if space provided is insufficient)

Yes No

1a). Is a variance requested of Section 101E Gateway Buffer Area? If yes, the application shall be reviewed by the Essex Inland Wetlands and Watercourses Commission (per Section 140L) and a letter of referral shall be provided by the EIWWC prior to attending the ZBA meeting.

2. Variance is requested to allow (Please describe proposed use, dimensions, height and location of any new construction PLUS any changes to use, size, shape, bulk, footprint, floor area or height of existing structure)
THE PROPOSED ADDITION TO THE EXISTING DECK IS TO ALLOW ACCESS TO A KITCHEN DOOR THAT HAS NO STEPS. IT IS UNSAFE AS IT IS PRESENTLY. See attached Deck SKETCH

(Please attach supplemental sheets if space provided is insufficient)

3. Strict application of Essex Zoning Regulations would result in an unusual hardship because of the following characteristics of the property (Support topological hardship claims with photographs, survey, etc.)

a. see photographs & Survey included

b. _____

c. _____

4. The above hardship is unique to this parcel and not shared by other in the area because:

a. IT IS TO ONLY ONE UNIT - UNIT 5
27 NO. MAIN ST. ESSEX, CT 06426.

b. THE DOOR IS ONLY ACCESSIBLE BY UNIT 5

c. _____

5. Described proposed reductions in legal pre-existing nonconformities, if any N/A

a. _____

b. _____

c. _____

The requested variance(s) are in harmony with the purpose and intent of Essex Zoning Regulations because:

- a. I + will relate to the
EXISTING Home Design & CONFORM AS SUCH
- b. with Build to code.
- c. _____

Have previous applications been made for this property? Yes No

If yes, previous application #s _____ Date Aug 5 - 1997
Prior variance request: Removed steps - Variance Board Action _____

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

- a. Fee of \$110.00 – Town Fee \$50 plus \$60 State Fee...payable to the Town of Essex 110
- b. 10 copies of the application, site plan (with setback lines) and sketch of the proposal.
- c. Copy of property deed
- d. Referral from Health Department
- N/A e. Referral from Essex IWWC (if applicable) no
- N/A f. Referral from adjacent towns no
- g. Referral from Gateway Conservation Commission

Owner/Applicant Commitments

I (we) certify that the statements hereinabove made and the documents submitted herewith are true to the best of my (our) knowledge and belief.

I (we) consent to allow Zoning Board of Appeals members access to the property for informal, independent site visits, for the purpose of evaluating this application prior to the Board rendering its decision.

Signature of applicant _____ Date: _____

Signature of property owner Aprilie Kasper _____ Date: 10/19/2022

cl



Property Information

Property ID 31'3-1
 Location 33 NORTH MAIN ST SX
 Owner REPASY CHRISTINE



**MAP FOR REFERENCE ONLY
NOT A LEGAL DOCUMENT**

Town of Essex, CT makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

Geometry updated 4/13/2021
 Data updated daily

Print map scale is approximate. Critical layout or measurement activities should not be done using this resource.







