

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

RECEIVED
MAY 27 2022

BY:

✓ #278 5/27/22

Variance Application

Date received by office _____ Application fee - \$50 + State fee - \$60 = \$110 Pd. _____

Application # _____ Hearing Date _____

Premises: Street Address 11 CURIOSITY LANE

Assessor's Map # 25-017 Lot # 17 Lot Area .68 ac

Zoning District YR Deed Reference: Book 330 Page 0701

Owner of Property VALERIE J & THOMAS IZZO

Address 11 CURIOSITY LANE, ESSEX, CT 06426
Street Town State Zip

Telephone (203) 667-4559 Email: Thomasizzol@gmail.com
home cell 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 BOARDOR 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) [Signature] Date 5/27/2022

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	25'	13.5'
<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.		
40I.1		25'	13.5'
60B	SIDE SETBACK	25'	13.5'

(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)

Proposed Use: Residential Garage. Height: 15'-11" +/- to ridge of roof.
Existing Structure to remain as is.

(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. *Hardship: Non-Conforming Lot size, Location of existing underground propane tank, Location of existing underground septic tank, Location of existing well.*

b.

c.

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

a. *Location of existing propane tank, Location of existing well.*

b.

c.

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

a. *N/A*

b.

c.

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

a. Maintaining Residential Use

b. Architecturally consistent w/neighborhood

c.

Have previous applications been made for this property? Yes No

If yes, previous application #s _____ Date _____
Prior variance request: _____ 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
- _____ 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
- _____ e. Referral from Essex IWWC (if applicable)
- _____ f. Referral from adjacent towns
- _____ 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  _____

Date: _____

WILCOX THOMAS R & ANN
9 CURIOSITY LA
ESSEX, CT 06426

WAGNER CATHARINE TRUSTEE OF THE CATHARIN
58 DENNISON RD
ESSEX, CT 06426

JAHNKE PAUL & EVELYN TRUSTEES
9 CHIMNEY PLACE
MONROE, CT 06468

GIGLIOTTI DAVIDSON
P.O. BOX 63
ESSEX, CT 06426

HERMANN RALPH J
16 CURIOSITY LA
ESSEX, CT 06426

GRISWOLD DEBORAH
54 DENNISON RD
ESSEX, CT 06426

MINER LOUISA A
12 CURIOSITY LA
ESSEX, CT 06426

READINGER FRANK M JR+MARY FRANCES
13 CURIOSITY LA
ESSEX, CT 06426

SERFES PAMELA S DUMAS TRUSTEE
15 CURIOSITY LA
ESSEX, CT 06426

KEMPINSKI CYNTHIA
20 CURIOSITY LA
ESSEX, CT 06426





