

|                            |
|----------------------------|
| <i>For Office Use Only</i> |
| APPLICATION NO. _____      |
| DATE FILED: _____          |
| DECISION DATE: _____       |
| DECISION: _____            |

**ZONING BOARD OF APPEALS  
CITY OF BRISTOL, CONNECTICUT  
APPLICATION FOR VARIANCE**

The undersigned Applicant hereby applies to the Bristol Zoning Board of Appeals for a variance of the Bristol Zoning Regulations.

Address or Location of the Property: \_\_\_\_\_

Assessor's Map No.: \_\_\_\_\_ Assessor's Lot No.(s): \_\_\_\_\_ Zone of the Property: \_\_\_\_\_

*Indicate the type of variance requested (e.g., lot area, side yard) and the Section of the Zoning Regulations being varied. If more than one variance, list each separately.*

| <u>Type of Variance</u> | <u>Section of the Zoning Regulations</u> |
|-------------------------|--|
| _____                   | _____                                    |
| _____                   | _____                                    |
| _____                   | _____                                    |

Briefly state the purpose of the proposed variance (e.g., "to build a two-car garage"): \_\_\_\_\_

Briefly state the specific hardship which causes the need for the proposed variance: \_\_\_\_\_

If any variances for this Property have previously been requested, indicate the application number, the date of ZBA action and the action taken: \_\_\_\_\_

Other comments: \_\_\_\_\_

**APPLICANT (If more than one, list on Page 2)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature – (Printed/Typed) \_\_\_\_\_

CHECK ONE: [ ] owner [ ] other (specify): \_\_\_\_\_

**OWNER(S) OF RECORD (If other than Applicant; if more than one, list on Page 2)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature – (Printed/Typed) \_\_\_\_\_

**THIS APPLICATION MUST BE FILED IN PERSON NO LATER THAN 12 NOON ON THE DEADLINE DAY FOR APPLICATION SUBMISSION – NO EXCEPTIONS!**

**CITY OF BRISTOL, CONNECTICUT  
SUPPLEMENTARY INFORMATION**

*For Office Use Only*  
APPLICATION NO. \_\_\_\_\_

Address or location of property: \_\_\_\_\_

**ADDITIONAL INFORMATION/COMMENTS (click inside the box below and begin typing)**

**ADDITIONAL APPLICANT**

Name: \_\_\_\_\_ CHECK ONE: [ ] owner [ ] other: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature – (Printed/Typed) \_\_\_\_\_

**ADDITIONAL OWNER(S) OF RECORD**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature – (Printed/Typed) \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature – (Printed/Typed) \_\_\_\_\_

**(OPTIONAL) SEND COPIES OF ALL CORRESPONDENCE TO:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**CITY OF BRISTOL, CONNECTICUT  
SUPPLEMENTARY INFORMATION**

*For Office Use Only*  
APPLICATION NO. \_\_\_\_\_

Address or location of property: \_\_\_\_\_

**ADDITIONAL INFORMATION/COMMENTS (click inside the box below and begin typing)**

**ADDITIONAL APPLICANT**

Name: \_\_\_\_\_ CHECK ONE: [ ] owner [ ] other: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature – (Printed/Typed) \_\_\_\_\_

**ADDITIONAL OWNER(S) OF RECORD**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature – (Printed/Typed) \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature – (Printed/Typed) \_\_\_\_\_

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Name: \_\_\_\_\_

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Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**ZONING BOARD of APPEALS  
CITY OF BRISTOL, CONNECTICUT  
APPLICATION FOR VARIANCE**

**The following shall be included as part of this application:**

- filing fee – \$185 (includes \$60 state fee) – make checks payable to "City of Bristol"
- four copies of a plot plan which has been certified, signed and sealed by a land surveyor registered and licensed to conduct business in Connecticut, drawn to scale and clearly showing the Property and the variance requested and including, at a minimum, all the information required below:
  - name of the property owner
  - address of the property
  - north arrow (approximate)
  - property lines (including length)
  - lot area (in square feet or acres)
  - any significant features (e.g., streams, large trees, fences)
  - existing and proposed buildings and structures (e.g., house, garage, deck)
  - driveways and parking spaces
- any other data or drawings as may be required by the Zoning Board of Appeals