

ZONING BOARD OF APPEALS
TOWN OF WESTON, CONNECTICUT

APPLICATION FOR VARIANCE TO ZONING REGULATIONS

Date of public hearing: _____
(Fourth Tuesday of month)

Applications for a variance must be submitted 20 days before the public hearing. You must also submit an electronic copy to the Land Use Director, Richelle Hodza at rhodza@westonct.gov. Date you are submitting this form to the Land Use Office at 24 School Road, Weston: _____

Address of subject property: _____, Weston, Connecticut 06883

Owner _____ mobile: _____ email: _____

Owner's mailing address (if different) : _____ email: _____

Applicant (if different) _____ phone: _____ email: _____

Tax Assessor's Map ___ Block ___ Lot ___ from [Property Record Card](#) found online at www.westonct.gov.

Zoning District: [Two-Acre Residential and Farming ___] [Village District ___]

Property [is ___] [is not ___] within 500 feet of a Town line.

SHORT DESCRIPTION OF VARIANCE REQUESTED: Summarize the variance you are requesting below. (For example, relief from the front and side yard setbacks to enlarge the kitchen.)

FULL NATURE OF VARIANCE REQUESTED: On a separate sheet of paper, state precisely the full nature of the variance you are requesting. You must indicate the specific sections of the [Zoning Regulations](#) from which you are requesting relief. And you must specify any measurable amounts or dimensions of relief you seek. For example, Section 321.6 of the regulations requires a front yard setback of 50 feet, and you ask to reduce the setback to 46 feet.

REASONS FOR VARIANCE REQUEST: State fully the reasons that you find the need for a variance of the zoning regulations. How would strict application of the regulations create exceptional difficulty or unusual hardship? How is this hardship, or how are these hardships, unique to this property and not shared by other properties in the neighborhood? (Bear in mind that financial hardship alone is not sufficient basis for the granting of a variance.) Use a separate sheet of paper.

NON-CONFORMING STRUCTURES: Does the variance requested constitute any increase in an existing nonconforming condition or feature (See [Section 374](#))? No ___ Yes ___ If yes, on a separate sheet, explain in detail.

PREVIOUS VARIANCES OR SPECIAL PERMITS: Have previous applications been made to this Board for variances or special permits? No ___ Yes ___ If yes, and they were approved, attach a copy of the variance or special permit filed on the land records.

I HEREBY DEPOSE AND AFFIRM that I have read the “Instructions for Zoning Board of Appeals Application” (appended hereto), and that all statements in this Application and the information contained in its supporting documents, are true to the best of my knowledge.

Property Owner _____ Date _____

Applicant or Authorized Agent _____ Date _____

The Owner or Authorized Agent hereby grants to Board members the right to make physical on-site inspection of the subject premises. as may be necessary to acquaint themselves with actual conditions. Any member making such inspection will do so at reasonable hours and will give reasonable notice by phone or text message.

Property Owner _____ Date _____

Applicant or Authorized Agent _____ Date _____

Received by: _____
Print name of Town Staff in receipt

Signature of Town Staff in receipt Date

INSTRUCTIONS FOR
ZONING BOARD OF APPEALS
VARIANCE APPLICATION

All applications for variances must begin with the proscribed form titled “Zoning Board of Appeals, Town of Weston, Connecticut, Application for Variance to Zoning Regulations,” (Revised 12/11/2024). Application forms are available in the Land Use Office during regular business hours (Mon – Thurs 9 – 4:30) or online. They must be filled out completely. Help is available from Land Use Staff.

In addition to the completed form, please submit the following:

1. APPLICATION FEE of \$160. This includes the State fee of \$60. (Payable to Town of Weston).
2. PLOT PLAN: An A-2 survey and site plan showing existing conditions and proposed alterations, certified by a licensed professional engineer or surveyor. At least one (1) copy must be on Arch D paper. Please supply an additional five (5) copies on 11 x 17 paper.
3. FLOOR PLAN: Include architectural plans where relevant for example, in the case of new construction or alterations that are the subject of the request for variance. Five (5) copies on 11 x 17.
4. [GIS](#): Locational map from the Town’s website. Five (5) copies on 8½ x 11.
5. [FIELD CARD](#): From Assessor’s records also found on the Town’s website. Five (5) copies on 8½ x 11.
6. [DEED](#): From Town Clerk’s land records (also available online).
7. LIST: All property owners within 250 feet of every boundary of the subject property, including those across streets. This list can be obtained from the [GIS](#) online.
8. ENVELOPES ADDRESSED TO NEIGHBORS: Provide stamped size No. 10 white envelopes (standard business envelopes) addressed to all property owners on the list above.
9. PHOTOGRAPHS: Supply color photos on 8½ x 11 illustrating the areas in question.
10. AUTHORIZATION TO ACT: The application must be signed by the Owner of Record. If the applicant is not the owner, provide a letter of authorization to act on the owner’s behalf.

We recommend that:

- Applicants review the application with the Land Use Director at the time of filing.
- In the case of proposed construction in an area Regulated by the Inland Wetlands and Watercourses Act or in a flood zone, consult with the Land Use Director or Conservation Planner before applying for a variance.
- Questions be directed to the Land Use Director: 203 222 2530 or rhodza@westonct.gov.