



CITY OF TORRINGTON
ZONING BOARD OF APPEALS
VARIANCE APPLICATION

Fee: \$210.00 Paid: (Includes \$60 State tax) CK# 2807

Property Location: 421 Litchfield ST Torrington CT 06790
 Zone: R6 Assessor's Map: III Block: 010 Lot: 012
 Size of Property: 0.2100 Sf/Acre

Applicant's Name: Debra A. Stewart
 Applicant's Address: 343 ST Catherine ST Winsted CT 06098
 Day Phone Number: 860 485 4974 Fax: _____
 Applicant's e-mail: debbystewart2@gmail.com

Owner's Name: Debra A. Stewart
 Owner's Address: 343 ST Catherine ST Winsted CT 06098
 Day Phone Number: 860 485 4974 Fax: _____
 Applicant's e-mail: debbystewart2@gmail.com
 Date Property was purchased: 7-12-2006

Does any portion of this property contain a conservation or preservation land restriction on it?
 Yes _____ No

If 'Yes' applicant must notify the holder of the land restriction regarding the application by certified mail, return receipt requested, no later than 60 days prior to the filing of the application. In lieu of such notice the applicant may submit a letter from the holder of such restriction (or their agent) verifying that the application is in compliance with the terms of the restriction.

This variance request is for: (Check all that apply)

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Principal Use of Lot | <input type="checkbox"/> Sign(s) | <input checked="" type="checkbox"/> Average Lot Width |
| <input checked="" type="checkbox"/> No. of Dwelling Units | <input checked="" type="checkbox"/> Front Yard Setback | <input type="checkbox"/> Building Coverage |
| <input type="checkbox"/> Accessory Structures | <input type="checkbox"/> Side Yard Setback | <input type="checkbox"/> Lot Size |
| <input type="checkbox"/> No. of Parking Spaces | <input type="checkbox"/> Rear Yard Setback | <input type="checkbox"/> Impervious Surface |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Building Height | <input checked="" type="checkbox"/> Other |

1. Section(s) of the Zoning Regulations from which the variance(s) is being requested:
4-0 Building Set back 9-10.2

2. Describe the exact variance(s) being requested:
Relief of what is required

3. Describe in detail the exceptional difficulty or unusual hardship (other than financial or personal) which would result if the variance is not granted:
Requesting a more conforming use from a grandfathered Non conforming use. I want both floors to be residential dwellings.

4. If the variance is granted, explain what will be done to prevent any adverse impacts to the surrounding properties:
No physical construction will be done

If the requested variance is a use variance, be able to answer each of the following questions:

1. Do the Zoning Regulations allow for *any* reasonable use of the property in question?
2. Is the proposed use the minimum variance necessary in order to allow reasonable use of the property? Explain.
3. Will the proposed use adversely impact the surrounding properties? Explain.

I, the undersigned applicant, understand that this application for Variance will be reviewed based on information submitted by me and that falsification by misrepresentation, omission or failure to comply with the conditions of the variance shall constitute a violation of the Zoning Regulations and render any approvals null and void. I further authorize the City's agent to enter the property for the purpose of inspection with regard to this application.

Applicant's Signature: [Signature] Date: 9-19-22
 Owner's Signature: [Signature] Date: 9-19-22

FOR OFFICE USE ONLY

Is this property within 500 feet of another municipality? Yes _____ No _____
 If 'Yes', list the town(s): _____
 Dates Towns were notified of Public Hearing: _____

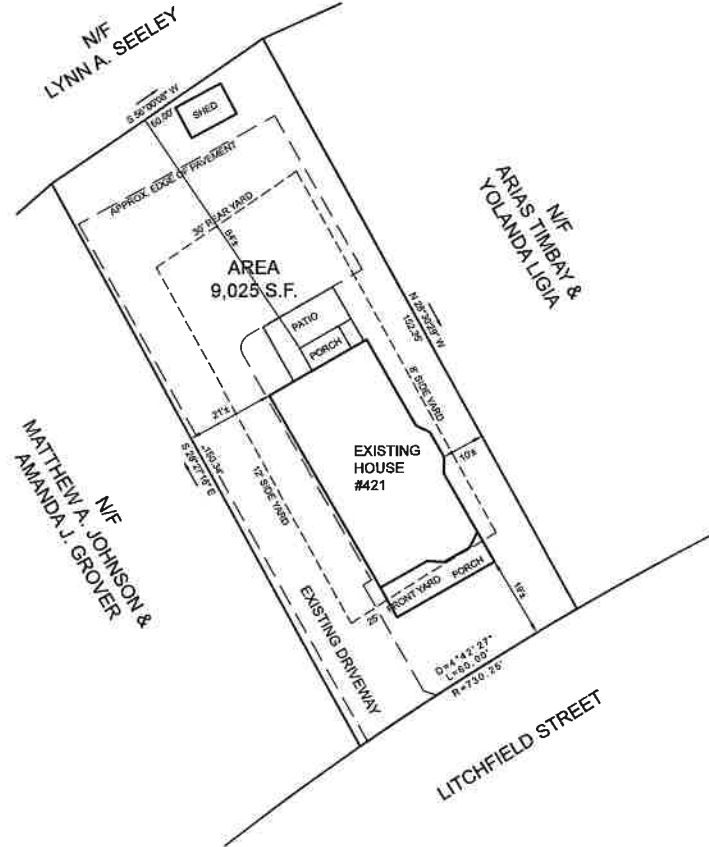
Departmental Comments:

Traffic Department: _____ Date: _____
 Fire Chief: _____ Date: _____
 City Planner: _____ Date: _____
 Building Official: _____ Date: _____
 City Engineer: _____ Date: _____
 Final Decision (with conditions): _____

Unusual Hardship or Exceptional Difficulty:

ZONING TABLE		
ZONE: R-6	REQUIRED	PROVIDED
LOT AREA	6,000 S.F.	9,025 S.F.
LOT WIDTH	60'	60'
FRONT YARD	25'	19'±
SIDE YARD	8'20" TOTAL	10'±/31'±
REAR YARD	30'	64'±
IMP CVG. RATIO	0.5	0.65±*

*LEGAL NON-CONFORMITY - EXISTING CONDITION



REFERENCE IS MADE TO A MAP TITLED:
 *PREPARED FOR WILLIAM LEE HALL 421 LITCHFIELD STREET TORRINGTON,
 CONNECTICUT DATE AUGUST, 2001* PREPARED BY STERLING LAND SURVEYING, LLC

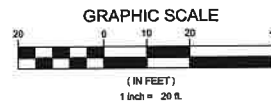
*THIS PLAN WAS COMPILED FROM OTHER MAPS, RECORD RESEARCH OR
 OTHER SOURCES OF INFORMATION. IT IS NOT TO BE CONSTRUED AS HAVING
 BEEN OBTAINED AS THE RESULT OF A FIELD SURVEY, AND IS SUBJECT TO
 SUCH CHANGE AS AN ACCURATE FIELD SURVEY MAY DISCLOSE.

TYPE OF SURVEY: COMPILED MAP
 BOUNDARY DETERMINATION CATEGORY: N/A
 CLASS OF ACCURACY: D*

TO MY KNOWLEDGE AND BELIEF, THIS MAP IS SUBSTANTIALLY CORRECT AS NOTED HEREON. THIS SURVEY WAS
 PREPARED PURSUANT TO THE REGULATIONS OF CONNECTICUT STATE AGENCIES SECTION 20-300b-1 THROUGH
 20-300b-20 AND THE "STANDARDS FOR SURVEYS AND MAPS IN THE STATE OF CONNECTICUT" AS ADOPTED BY THE
 CONNECTICUT ASSOCIATION OF LAND SURVEYORS, INC., ON SEPTEMBER 26, 1996.

William T. Clark
 WILLIAM T. CLARK L.S. #70080

NOT VALID WITHOUT EMBOSSED SEAL



COMPILED PLAN
 421 LITCHFIELD STREET
 PROPERTY OF
 DEBRA A. STEWART
 TORRINGTON, CONNECTICUT

CLARK LAND SURVEYING, LLC		
126 TUNXIS ROAD		
BRISTOL, CONN 06010		
(860)-967-8590		
TODD@CLARKLS.BIZ		
DATE: 9-15-2022	SCALE: 1" = 20'	MAP NO. 2022-71