

ZONING BOARD OF REVIEW

APPLICATION CHECKLIST FOR: DIMENSIONAL VARIANCE

The application for a Dimensional Variance to the Zoning Board of Review must be accompanied with the following information:

A. Three (3) copies of a site plan prepared by, and signed and stamped by, a professional engine	eer
or professional land surveyor at a scale of no less than one (1) inch - forty (40) feet clearly	
showing:	

name & address of property owner(s)
date, north arrow, graphic scale, lot dimensions and area
plat & lot, zoning district(s) and setbacks
existing and proposed structures, and their relationship & distances from lot
boundary lines
existing and proposed parking areas and walkways
existing and proposed landscaping, as it relates to the request
existing streets, 911 address, wells, septic system
list of names and addresses of all property owners within 200 feet of subject propert
any peculiar site conditions or features

- **B.** Three (3) copies of a separate map indicating all property owners within 200 feet of the subject property and/or all those property owners and entities which require notice under Section 45:24:53 R.I.G.L., also depicting any zoning district boundary and uses of all neighboring properties.
- C. A letter from a biologist indicating that there are <u>no</u> freshwater wetlands on or in proximity to the site such that the application is regulated by the R.I. Freshwater Wetlands Act. In those instances where the application <u>is</u> regulated by the R.I. Freshwater Wetlands Act, a physical alteration permit issued by the R.I. Department of Environmental Management, and where applicable, the U.S. Army Corp of Engineers, shall be required.
- D. Location of existing septic system. Where construction requires approval by R.I.DEM · Division of Land Resources for a ISDS (individual sewage disposal system) or change of use permit for the proposed activity, attach a copy to the application.
- E. On a separate site plan, indicate existing and proposed topography at two (2) foot intervals.

NOTE: Upon the applicant's request, the Zoning Board of Review, in appropriate circumstances, may waive the provision of any items of information listed above. The specific reasons for the request of waiver of checklist items must be described on the application. The waiver(s) requested must be approved by the Zoning Board before an application without all the items listed above will be deemed complete.

TOWN OF HOPKINTON ZONING BOARD OF REVIEW



To: Hopkinton Zoning Board of Review

Town Hall

1 Town House Road

Hopkinton, R.I. 02833

Ladies/Gentlemen:

The undersigned hereby applies to the Hopkinton Zoning Board of Review for a DIMENSIONAL VARIANCE in the application of the provisions or regulations of the Hopkinton Zoning Ordinance affecting the following described premises in the manner and on the grounds hereinafter set forth.

NAMES:	
	Address:
Owner:	Address:
Lessee:	Address:
1. Filing Instructions:	
a. The original application and two (2) c Clerk's Office in accordance with the m	opies, either typed or legibly printed, must be filed with the Town inimum time required to post adequate notice.
cover the costs of legal advertisement a be responsible for all costs incurred by	shall accompany an application to the Zoning Board of Review to and processing. In addition to the \$50.00 fee, the applicant shall also the town in the course of review of this application, including when the final costs have been determined.
c. All required checklist items for a DIN be considered a complete application.	MENSIONAL VARIANCE must accompany the application in order to
2. Location of Premises:	(Name of Street or Road)
3. Plat(s)Lots(s)	Zoning District(s)
911 Address:	
4. Dimensions of Lot:feet by	(Depth) (Square Ft. or Acres)
5. State present use of premises:	
6. State proposed use of premises:	
7. Is there a building(s) on the premises at	present?
8. How long have you owned the premises	?
State year which lot(s) were platted and	f recorded:
9. Have you submitted plans to the Buildin	g & Zoning Inspector?
Has a permit been refused?	
If a permit has been refused, attach a	copy of the denial, in writing.
10. Please give the size (in feet) of all exis	sting buildings and accessory structures:
11. Please give the size (in feet) of all pro	posea bullaings and accessury structures.

5. Clearly state the grounds for which this DIMENSIONAL VARIANCE is sought: 6. Request of Waiver: Please indicate the checklist items that are requested to be waived by the Zoning loard and the reasons for the request.	2. Please describe the extent of the proposed alterations:	•
3. Please indicate the number of families which building is to be arranged? 4. Indicate the provision or regulation of the Hopkinton Zoning Ordinance under which application for IMENSIONAL VARIANCE is made: 5. Clearly state the grounds for which this DIMENSIONAL VARIANCE is sought: 6. Request of Waiver: Please indicate the checklist items that are requested to be waived by the Zoning loard and the reasons for the request.		
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Signature	Signature	
Signature	Signature	
Address	Address	
Phone Number		