



TOWN OF NORTH BRANFORD

TOWN HALL 909 FOXON ROAD NORTH BRANFORD, CONNECTICUT 06471-1290
Building Department (203) 484-6008 Engineering Department (203) 484-6009
Planning & Zoning (203) 484-6010
Department Fax (203) 484-6018

TOWN OF NORTH BRANFORD

APPLICATION TO THE

ZONING BOARD OF APPEALS

INSTRUCTIONS:

Submit the following:

1. Application Form: 1 original and 9 copies
2. Site Plan/Plot Plan*: 10 copies drawn to scale (*see attached plot plan checklist)
3. Architectural Plans (if required): 10 copies
4. Any additional information necessary (i.e. floor plans, etc.).
5. Fee: Check made payable to the Town of North Branford (see attached fee schedule).
6. Certified receipts for abutters (submit prior to meeting).

APPLICANT MUST:

1. **NOTIFY** the Regional Water Authority if your property falls within the watershed area within seven (7) days of application to the Town. Application to the RWA is attached. Submit copy to the Planning office also.
2. **POST** "Public Hearing Sign" *fifteen (15) days* prior to the meeting (sign provided to you by the Town).
3. **MAIL** abutters notices (via certificate of mailing) at least *fifteen (15) days* prior to the meeting (see sample attached). Verify owner info is correct on list prior to mailing letters.
4. **RETURN** certified receipts to the Planning Office prior to the meeting.

Date Filed: _____

Appl. # _____

TOWN OF NORTH BRANFORD

APPLICATION TO THE ZONING BOARDS OF APPEALS

1. The undersigned requests that the Town of North Branford's Zoning Board of Appeals grant the following (check one):
 - a. Variance _____
 - b. Recertification of Use _____
 - c. Reverse/Modify Decision of Zoning Enforcement Officer _____
 - d. Approval of Location _____
 - e. Other (specify): _____

2. Address of Property: _____
Present Zone: _____ Map _____ Lot _____

3. Owner of Property: _____
Mailing Address: _____
Telephone: _____ Cell #: _____
E-mail address: _____

4. Applicant/Agent: _____
Mailing Address: _____
Telephone: _____ Cell #: _____
E-mail address: _____

5. Is the lot conforming? Yes _____ No _____
Describe the nonconformity: _____

6. Does the property have a nonconforming use, building or structure?
Yes _____ No _____
Describe the nonconformity: _____

7. Section of Zoning Regulations for variance:
 - a. _____
 - b. _____
 - c. _____
 - d. _____
 - e. _____

8. What is the extent of the appeal requested:

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

9. Describe the ground of the appeal, stating the hardship: _____

10. Does the property lie within 500 feet of another Town?

Yes _____ No _____

11. Has a previous application been filed? Yes _____ No _____

If yes, Application # _____ Date of ZBA decision _____

Application # _____ Date of ZBA decision _____

I hereby certify that all statements contained herein and attached exhibits are true.

Signature of Owner Date

Signature of Agent Date

Print name

Print name

Office use only

Date Filed: _____

Date of hearing: _____

Fee Received: _____

TOWN OF NORTH BRANFORD
CERTIFIED PLOT PLAN CHECKLIST

- a. Name of applicant and property owner _____
- b. Area of lot, dimensions, radii and angles or bearings of all lot lines _____
- c. Street address and assessor's map and lot number _____
- d. North arrow and graphic scale _____
- e. Height, dimensions, use, floor area, ground coverage, and location of all Buildings and other structures _____
- f. Locations, area, and dimensions of off-street parking and loading spaces, curbcuts, driveways, easements, and right-of-ways _____
- g. Dimensions of all setback lines observed by buildings and structures _____
- h. Location of any on-site sewage disposal system, water supply well, or waterline _____
- i. Signs and other facilities and improvements that are subject to provisions of these Regulations _____
- j. Any wetlands, watercourses, 25 year flood line, 100 year flood line, and flood way boundary lines _____
- k. When property is located in flood-prone areas including existing and proposed site grades, contours and elevations, base flood elevation data, top of foundation elevation, finished floor elevation, and any proposed watercourse relocation _____
- l. Additional information needed to determine compliance with the Regulations _____

Note: Plot plan accompanying applications which pertain to a nonconforming building or structure or a nonconforming lot shall be prepared and certified as an A-2 map by a licensed land surveyor or engineer.

Signature of Owner/Applicant: _____

Date: _____

SAMPLE

ZBA NOTIFICATION LETTER

The owner of the parcel of land known as _____
has submitted an application to appear in front of the North Branford Zoning Board of Appeals at
7:00 p.m. on _____ at the North Branford Town Hall, 909 Foxon Road,
North Branford, Connecticut. In accordance with Section 61 of the North Branford Zoning
Regulations it has been determined that you own property, which falls within 100 feet of this
location and are therefore being notified.

The applicant has requested the following:

Property Owner's Name

Applicant's Name

Questions can be directed to the Building Department / Zoning Enforcement Officer at
(203) 484-6010

South Central Connecticut Regional Water Authority
90 Sargent Drive, New Haven, Connecticut 06511-5966 203-562-4020
<http://www.rwater.com>

Revised 09/23/25

Public Water Supply Watershed/Aquifer
Project Notification Form
For The
South Central Connecticut Regional Water Authority

REQUIREMENT:

All applicants before a municipal Planning and Zoning Commission, Inland Wetlands Commission, or Zoning Board of Appeals for any project located within a public water supply watershed or aquifer protection area are required by Public Act 89-301 (Sections 8-3i and 22a-42f of the Connecticut General Statutes) to notify the affected public water utility by certified mail within 7 days of the application.

GENERAL INFORMATION:

Maps showing the location of Regional Water Authority (RWA) watershed boundaries are on file with municipal planning and zoning, and inland wetlands staff, and Town Clerks. The applicant's notification to the RWA should include the information requested on pages two and three. The RWA may request additional information if it is determined that a more detailed review is necessary. Any questions should be directed to (203) 401-2786, or emoore@rwater.com.

Please email this completed form and attachments to:

emoore@rwater.com

or by mail to:

Environmental Analysts
Environmental Planning Department
Regional Water Authority
90 Sargent Drive
New Haven, CT 06511

1. Applicants are requested to submit any information that was included in the application to the municipality including: site plan, project narrative, sediment and erosion control plan and drainage calculations if applicable.

2. Project address _____ Town _____

3. Application for: ___ Planning and Zoning ___ Inland Wetlands ___ Zoning Board of Appeals

4 Project Description: _____

5. Waste Water Disposal: ___ Septic System ___ Public Sewer ___ None

6. Water Supply: ___ Private Well ___ Public Water

7. Heating Fuel: ___ Oil ___ Gas Other _____

Applications involving additions or modifications to single family residences or applications with no site disturbance and no storage or use of hazardous chemicals skip to item 18.

8. Total acreage of project site _____

9. Total acreage of area to be disturbed including structures, additions, paving, and soil disturbance

10. Percent of existing impervious surfaces including buildings, roads and pavement _____

11. Proposed increase in impervious surfaces _____

12. Number of **existing and proposed** floor drains or sump pumps and their point of discharge e.g. sanitary sewer, holding tank, or ground

13. Are there any wetlands or watercourses on the property? If so, describe

14. Brief description of **existing and proposed** stormwater management system, including roof drainage, paved areas etc., and discharge points e.g. municipal system, drywells, streams, vegetated areas, detention basins etc. Attach drainage plans and calculations if available

15. List of **existing and proposed** underground or above-ground storage tanks including age, capacity and contents

16. List of potentially harmful chemicals stored or used on property (**existing and proposed**) and typical onsite volumes, including but not limited to petroleum products, lubricants, solvents, detergents, and pesticides

17. Describe any wastes generated and their means of disposal

18. Contact Information:

Name: _____

Company: _____

Address: _____

Phone: _____

Email: _____

Name of Person Completing Form

Signature

Date

TOWN OF NORTH BRANFORD

**THE FOLLOWING APPLICATION FEES SHALL BE CHARGED BY THE
ZONING BOARD OF APPEALS**

EFFECTIVE OCTOBER 1, 2009

CLASSIFICATION	APPLICATION FEE*	STATE ED FEE	TOTAL FEE (includes 2 variances)	EACH ADDITIONAL VARIANCE
1. RESIDENTIAL	\$115.00	\$60.00	\$175.00	\$50.00 / for each additional variance
2. COMMERCIAL	\$120.00	\$60.00	\$180.00	\$50.00
3. INDUSTRIAL	\$130.00	\$60.00	\$190.00	\$50.00

* Application fee includes advertising cost.