



## City of Quincy

# Zoning Board of Appeals Application Requirements

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- 1) **All** material submitted for each case **must** be submitted to the Zoning Clerk at least 21 calendar days before the hearing. The Board will not consider any materials submitted at the hearing or within that 21 day period.
  - 2) All applications shall be accompanied by a check payable to the "City of Quincy" in the amount of \$110.00 for 1 & 2 family and \$210.00 for all others. The Applicant shall also submit a check in the amount of \$100.00 payable to the Quincy Sun for the cost of the legal advertisement.
  - 3) \*A copy of the 11' x 17' Assessors Plan for the subject property.
  - 4) \*Certified Plot Plan should show all information pertinent to the relief requested. For example, if the Applicant is seeking a variance and claims a hardship relative to the shape, soil and topography of the lot, the certified plot plan submitted **must** show the topography.
  - 5) \*Building Plans should be ¼" = 1' scale and should show the following: location and use of rooms, existing conditions and proposed conditions, elevation of proposed building and relation to existing buildings. Photos may also be provided.
  - 6) \*Applicants seeking a Special Permit Flood Plain must submit a "One Inch Letter" stamped and signed by a **Registered Professional Engineer**. Please refer to the City of Quincy Zoning Ordinance Chapter 17.40.
  - 7) \*Every application must include a brief summary of the case explaining the relief sought by the Applicant and the reasons why they seek relief and cite any applicable case law. This summary should also address the following issues:
    - a) The particular use proposed for the land or building
    - b) The conditions especially effecting the property for which a variance is sought.
    - c) Facts which make up the hardship
    - d) Facts relied upon to support a finding that the relief sought may be given without nullifying or substantially derogating from the intent or purpose or the zoning ordinance.
- \*Original plus 14 copies of each of the above is required. The information MUST be compiled into fourteen (14) packages each containing the required documentation plus the original package.**
- 8) In the event that the hearing is continued and additional plans or other documentation are requested by the Board, the additional plans or other documentation must be submitted to the Clerk of the Zoning Board of Appeals no later than 10 business days prior to the continued hearing dated as agreed upon by the Board and the Applicant.

- 9) **Applicant must meet (by appointment) with the Building Inspector assigned to that area or the Inspectional Services Director and the Zoning Board Clerk prior to submission of application.**
- 10) \*Applicant is responsible for coordinating review of plans by pertinent city departments. Applicant is responsible for insuring that applicable comments from city departments are delivered to the ZBA in a timely fashion for review by the ZBA. **\*PLEASE REFER TO CITY OF QUINCY ZONING ORDINANCE CH. 17.04.235 FOR 10 OR MORE UNITS, THE SO CALLED "INCLUSIONARY ZONING AMENDMENT".**
- 11) Applicant is responsible for obtaining **ONE CERTIFIED** list of abutters within 300 feet of property from the City of Quincy Assessors Department that must be submitted to the Zoning Board of Appeal clerk at least 21 days prior to the date of the hearing. ***The abutters list must be in label form (2 copies) at a cost of \$0.50 per label.***

**CITY OF QUINCY**  
**APPLICATION TO BOARD OF APPEAL**

CASE NO: \_\_\_\_\_

FEE: \_\_\_\_\_

The undersigned hereby petitions the Zoning Board of Appeal for the following:

Special Permit \_\_\_ Variance \_\_\_ Appeal \_\_\_ Flood Plain \_\_\_ Comprehensive Permit \_\_\_ Finding \_\_\_

Location of Property: \_\_\_\_\_ Section of City \_\_\_\_\_

Petitioner: \_\_\_\_\_

Petitioner's Address & Phone: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

Owner's Address & Phone: \_\_\_\_\_

Type of Occupancy: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Lot No. \_\_\_\_\_ Plan No: \_\_\_\_\_

Is any portion of this structure being demolished? \_\_\_\_\_

List any existing zoning appeal case numbers on this property: \_\_\_\_\_

Applicable Section(s) of the Zoning Ordinance: \_\_\_\_\_

Nature of Request: \_\_\_\_\_

**Note: "Proposals for residential projects of ten (10) or more units are required to comply with 17.04.235, the so- called Inclusionary Zoning Amendment"**

Date: \_\_\_\_\_

Signature Owner: \_\_\_\_\_

Applicant: \_\_\_\_\_

Attorney: \_\_\_\_\_

**TO BE COMPLETED BY BUILDING INSPECTOR**

Reason for Denial: \_\_\_\_\_

Date: \_\_\_\_\_

Inspector: \_\_\_\_\_

# Dimensional Form

LOCATION: \_\_\_\_\_ ZONE: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

PRESENT USE/OCCUPANCY: \_\_\_\_\_ REQUESTED USE/OCCUPANCY: \_\_\_\_\_

FLOOD PLAIN DISTRICT: \_\_\_\_\_ HISTORIC DISTRICT: \_\_\_\_\_

	<u>EXISTING CONDITIONS</u>	<u>REQUESTED CONDITIONS</u>	<u>ORDINANCE REQUIREMENTS</u>
MINIMUM LOT SIZE	_____	_____	_____
RATIO OF TOTAL FLOOR AREA TO LOT AREA	_____	_____	_____
BUILDING HEIGHT	_____	_____	_____
MINIMUM LOT AREA PER DWELLING UNIT	_____	_____	_____
WIDTH OF LOT	_____	_____	_____
MINIMUM YARD SETBACK			
FRONT	_____	_____	_____
REAR	_____	_____	_____
SIDE LEFT	_____	_____	_____
SIDE RIGHT	_____	_____	_____
GREEN AREA SPACES PER DWELLING UNIT	_____	_____	_____
NO. OF PARKING SPACES	_____	_____	_____
PARKING SETBACKS	_____	_____	_____
NO. OF DWELLING UNITS	_____	_____	_____
NO. OF LOADING BAYS	_____	_____	_____