



288 Central Avenue
Dover, New Hampshire 03820-4169
Tel: (603) 516-6008
Fax: (603) 516-6007

Zoning Board of Adjustment City of Dover, New Hampshire

HOURS: Monday – Friday 8:00 AM - 4:00 PM

Dear Applicant:

This will serve to briefly inform you as to what you must do to bring a petition before the Dover Zoning Board of Adjustment (ZBA). Please refer to the NH Statutes on Land Use and Regulation and the Dover Zoning Ordinance for more specific information. You must complete the application(s) applicable to you. There are four (4) purposes to petition the ZBA; they are:

1. **Variances** - where special circumstances exist in the property warranting the use of that property in a manner which literally or technically is in violation of the ordinance. There are two types of variances, a Use Variance and an Area Variance.
2. **Special Exceptions** - where the ordinance specifically permits a particular use provided the applicant can prove that whatever conditions attached to such use by the ordinance have or will be complied with.
3. **Appeal from Administrative Decisions** - where the applicant feels that the Administrative Official made an error in applying or interpreting the zoning ordinance in a particular case.
4. **Equitable Waiver of Dimensional Requirements** - where a lot or other division of land, or structure thereupon, is discovered to be in violation of a physical layout or dimensional requirement imposed by a zoning ordinance enacted pursuant to RSA:674:16.

The ZBA cannot and will not grant the relief sought unless the applicant proves the elements of his or her case. For example, variances may not be granted solely because the applicant is suffering from financial hardships or other personal hardships or whimsically would like to put his or her property to a non-conforming use. The attached check-list is provided to advise you what information must be included with your application, but may not include all required information for your particular case.

YOU, THE APPLICANT, ARE RESPONSIBLE FOR PRESENTING SUFFICIENT INFORMATION TO SUPPORT AND PROVE YOUR CASE. WHEN FILLING OUT THE APPLICATION, PLEASE PRINT OR TYPE.

Familiarity with the particular provision of the Zoning Ordinance that affects your property is important, and any specific questions you may have relative to your particular case can be answered either by obtaining a copy of the Zoning Ordinance at the City Clerk's Office, or by inquiring at the Planning Office, Municipal Building, 288 Central Avenue, Dover, NH 03820.

You may represent yourself or authorize, in writing, someone else to represent you.

Please be advised that a decision may not be made the same night of the hearing.

CASE # _____ DATE RECEIVED _____

AMOUNT PAID \$ _____ TIME RECEIVED _____

**CITY OF DOVER
ZONING BOARD OF ADJUSTMENT
APPLICATION**

I. APPLICANT _____ PHONE #: _____

ADDRESS _____

PROPERTY OWNER _____

ADDRESS _____

PROPERTY LOCATION _____

BRIEF DIRECTIONS _____

ZONE _____ ASSESSOR'S MAP _____ LOT #(S) _____

TYPE OF APPEAL: (Please check off one)

_____ VARIANCE	ARTICLE _____	SECTION _____
_____ SPECIAL EXCEPTION	ARTICLE _____	SECTION _____
_____ ADMINISTRATIVE DECISION	ARTICLE _____	SECTION _____
_____ EQUITABLE WAIVER	ARTICLE _____	SECTION _____

Describe briefly your plans for this property:

II. REQUIREMENTS SUBMITTED: (Please check off)

A. Plot plan drawn in accordance with a boundary line survey to scale not less than 1" = 40', **(12 copies)**. They need to include the lot dimensions including area in square feet, and also the size and location of existing and proposed buildings if applicable, including setbacks. _____

B. List of abutters including addresses and map and lot number of parcels who adjoin or are directly across the street or stream from property. _____

C. Application fee of:

\$100.00 VARIANCE	\$ _____
\$100.00 SPECIAL EXCEPTION	\$ _____
\$25.00 APPEAL FROM ADMINISTRATIVE DECISION	\$ _____
\$100.00 EQUITABLE WAIVER	\$ _____

D. Certified letters fee:

# of abutters _____ X \$5.54 =	\$ _____
Applicant & Owner _____ X \$5.54 =	\$ _____
Foster's ad	\$ <u>60.00</u>

TOTAL \$ _____

III. **NARRATIVE:** Complete the section pertaining to your request for a dimensional/area variance. Keep your answers brief and be prepared to explain them in detail at the meeting. The burden of proof is on the applicant. If you need more space use an additional sheet of paper

DIMENSIONAL/AREA VARIANCE REQUIREMENTS: (PLEASE TYPE OR PRINT IN INK)

1. Provide proof that special conditions exist and that literal enforcement of the ordinance would result in an unnecessary hardship. Demonstrate that an area variance is needed to enable the applicant's proposed use of the property given the special conditions of the property; and that the benefit sought by the applicant cannot be achieved by some other method reasonably feasible for the applicant to pursue, without the area variance.

2. Provide proof that demonstrates how granting the variance will result in substantial justice.

3. Provide proof that demonstrates how a variance would be consistent with the spirit and intent of the ordinance.

4. Provide proof that demonstrates the variance will not result in a diminution in value of surrounding properties.

5. Provide proof that demonstrates the variance would not be contrary to the public interest.

USE VARIANCE REQUIREMENTS: (PLEASE TYPE OR PRINT IN INK)

1. Provide proof that special conditions exist and that literal enforcement of the ordinance would result in unnecessary hardship. Demonstrate that: i.) the ordinance interferes with the reasonable use of the property, considering the unique setting of the property in its environment; ii.) no fair and substantial relationship exists between the general purposes of the zoning ordinance and the specific restriction on the property; and iii.) the variance would not injure the public or private rights of others.

2. Provide proof that demonstrates how granting of the variance will result in substantial justice.

3. Provide proof that demonstrates how a variance would be consistent with the spirit and intent of the ordinance.

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EQUITABLE WAIVER OF DIMENSIONAL REQUIREMENTS

An Equitable Waiver of Dimensional Requirements is requested from Article _____
Section _____ of the Zoning ordinance to permit _____

- 1. Does the request involve a dimension requirement, not a use restriction? yes no

- 2. a) Explain how the violation has existed for 10 years or more with no enforcement action, including written notice, being commenced by the city **OR** b) explain how the nonconformity was discovered after the structure was substantially completed or after a vacant lot in violation had been transferred to a bona fide purchaser **AND** how the violation was not an outcome of ignorance of the law or bad faith but resulted from a legitimate mistake.

- 3. Explain how the nonconformity does not constitute a nuisance nor diminish the value or interfere with future uses of other property in the area.

- 4. Explain how the cost of correction far outweighs any public benefit to be gained.

NOTE: The Board must find in the affirmative on all four questions or the request must be denied

SPECIAL EXCEPTION REQUIREMENTS

- 1. Explain how the requested use would be essential or desirable to the public convenience or welfare.

- 2. Detail how the requested use would not create undue traffic congestion or unduly impair pedestrian safety.

- 3. Describe how the requested use would not overload any public water, drainage or sewerage system or any other municipal system to such an extent that the requested use or any developed use in the immediate area or in any other area of the City will be unduly subjected to hazards affecting health, safety or the general welfare.

APPEAL FROM AN ADMINISTRATIVE DECISION

- 1. Explain why you feel that the Administrative Official made an error in applying or interpreting the zoning ordinance in a particular case.

IV. As applicant of standing of this request, I certify that the information herein is complete and accurate.

<p>IMPORTANT</p> <p>PROPERTY IDENTIFICATION SIGN MUST BE POSTED ON THE PROPERTY FOR THE 10 DAYS PRIOR TO HEARING.</p> <p>FAILURE TO POST MAY RESULT IN APPLICATION NOT BEING ACCEPTED</p>
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Signature of Applicant*

Signature of Owner*

*Both Signatures Required

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