

MAR 13 2021

CITY OF PROVIDENCE
ZONING BOARD OF REVIEW

APPLICATION FOR VARIANCE OR SPECIAL USE PERMIT

Check Each Type Zoning Relief Sought:

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

Variance – Use *
Variance – Dimensional*
Special Use Permit **

* Attach Appendix A to apply for a Use or Dimensional Variance

**Attach Appendix B to apply for a Special Use Permit

Applicant: BAHMAN JALILI

Address 374 WICKENDEN ST PROVIDENCE, RI

Zip Code 02903

E-mail COASTWAYMANAGEMENT@GMAIL.COM

Phone 401.641.2244

Home/Office

401.641.2244

Mobile (Cell)

Owner: COASTWAY MANAGEMENT LLC

Address 108 ENDEAN RD. EAST WALPOLE, MA

Zip Code 02032

E-mail COASTWAYMANAGEMENT@GMAIL.COM

Phone 401.641.2244

Home/Office

401.641.2244

Mobile (Cell)

Lessee: _____

Address _____

Zip Code _____

E-mail _____

Phone: _____

Home/Office

Mobile (Cell)

Does the proposal require review by any of the following (check each):

- _____ Downtown Design Review Committee
- _____ I-195 Redevelopment District Commission
- _____ Capital Center Commission
- _____ Historic District Commission

1. **Location of Property:** 169 TRANSIT STREET AP 16 LOT 389

Street Address

R-2

2. **Zoning District(s):** _____

Special purpose or overlay district(s): _____

3a. **Date owner purchased the Property:** APRIL 2020

3b. **Month/year of lessee's occupancy:** _____

3. Dimensions of each lot:

Lot #	<u>389</u>	Frontage	<u>44.8'</u>	depth	<u>89.1'</u>	Total area	<u>3843</u>	sq. ft.
Lot #	<u> </u>	Frontage	<u> </u>	depth	<u> </u>	Total area	<u> </u>	sq. ft.
Lot #	<u> </u>	Frontage	<u> </u>	depth	<u> </u>	Total area	<u> </u>	sq. ft.

4. Size of each structure located on the Property:

Principal Structure:	Total gross square footage	<u> </u>
Footprint <u> </u>	Height <u> </u>	Floors <u> </u>
Accessory Structure:	Total gross square footage	<u> </u>
Footprint <u> </u>	Height <u> </u>	Floors <u> </u>

5. Size of proposed structure(s):	Total gross square footage:	<u>4680</u>
Footprint <u>26' X 60'</u>	Height <u>40'</u>	Floors <u>3</u>

6a. Existing Lot coverage: (include all buildings, decks, etc.) 0%

6b. Proposed Lot coverage: (include new construction) 40.5%

7a. Present Use of Property (each lot/structure):
VACANT LOT - PARKING LOT

7b. Legal Use of Property (each lot/structure) as recorded in Dept. of Inspection & Standards:

8. Proposed Use of Property (each lot/structure):
TWO FAMILY DWELLING-TOWNHOUSE

9. Number of Current Parking Spaces: 10

10. Describe the proposed construction or alterations (each lot/structure):
CONSTRUCT A NEW 26' X 60' TWO FAMILY-TOWNHOUSE

11. Are there outstanding violations concerning the Property under any of the following:
 Zoning Ordinance
 RI State Building Code
 Providence Housing Code

12. List all Sections of the Zoning Ordinance from which relief is sought and description of each section:
402 T 4-1 DIMENSIONAL STANDARDS-MINIMUM LOT AREA (4000 SF REQ FOR A
TWO FAMILY, 3843 SF IS PROVIDED ((157 SF SHORTAGE OR 3%))

13. Explain the changes proposed for the Property.

A NEW TWO FAMILY TOWNHOUSE IS PROPOSED FOR THIS LOT WITH 3843 SF OF LOT AREA.
4000 SF IS REQUIRED FOR A TWO FAMILY ON EXISTING LOTS IN THE R-2 ZONE.
ALL OTHER DIMENSIONAL CRITERIA WILL COMPLY.

The undersigned acknowledge(s) and agree(s) that members of the Zoning Board of Review and its staff may enter upon the exterior of the Property in order to view the Property prior to any hearing on the application.

The undersigned further acknowledge(s) that the statements herein and in any attachments or appendices are true and accurate, and that providing a false statement in this application may be subject to criminal and/or civil penalties as provided by law, including prosecution under the State and Municipal False Claims Acts. Owner(s)/Applicant(s) are jointly responsible with their attorneys for any false statements.

Owner(s):

BAHMAN JALILI

Type Name

Signature

Type Name

Signature

Applicant(s):

BAHMAN JALILI

Type Name

Signature

Type Name

Signature

All requirements listed and described in the Instruction Sheet must be met or this application will not be considered complete.

APPENDIX A

APPLICATION FOR VARIANCE(S)

Rhode Island General Laws § 45-24-41(c) requires that the Applicant for a variance demonstrate:

- (1) That the hardship from which the applicant seeks relief is due to the unique characteristics of the subject land or structure and not to the general characteristics of the surrounding area; and is not due to a physical or economic disability of the applicant, excepting those physical disabilities addressed in § 45-24-30(16);
- (2) That the hardship is not the result of any prior action of the applicant and does not result primarily from the desire of the applicant to realize greater financial gain;
- (3) That the granting of the requested variance will not alter the general character of the surrounding area or impair the intent or purpose of the zoning ordinance or the comprehensive plan upon which the ordinance is based;
- (4) That the relief to be granted is the least relief necessary; and
- (5) (a) For a **use variance**: That the land or structure cannot yield any beneficial use if it is required to conform to the provisions of the zoning ordinance;
- (b) For a **dimensional variance**, that the hardship suffered by the owner of the subject property if the dimensional variance is not granted amounts to more than a mere inconvenience.

Please provide the following information:

1. What is the specific hardship from which the applicant seeks relief?

UNIQUE SIZE OF EXISTING LOT. 3843 SF OF LOT AREA EXISTS AND 4000 SF OF LOT AREA IS REQUIRED FOR A TWO FAMILY.

2. Specify any and all unique characteristics of the land or structure that cause the hardship?

UNIQUE SIZE OF EXISTING LOT

3. (a) Is the hardship caused by an economic disability? Yes _____ No X _____

(b) Is the hardship caused by a physical disability? Yes _____ No X _____

(c) If the response to subsection (b) is "yes," is the physical disability covered by the Americans with Disabilities Act of 1990 (ADA), 42 U.S.C. § 12101 et seq.?

Yes _____ No _____

4. Did the owner/applicant take any prior action with respect to the Property that resulted in the need for the variance requested? (Examples include, but are not limited to, any changes the owner/applicant made to the structure(s), lot lines, or land, or changes in use of the Property)?

Yes _____ No X _____

If "yes," describe any and all such prior action(s), and state the month/year taken.

5. State any and all facts to support your position that the applicant is not seeking the variance(s) primarily in order to obtain greater financial gain.

RATHER TO DEVELOP THE PROPERTY WITH A TWO FAMILY IN THE R-2 ZONE IS
CONSISTENT WITH THE INTENT AND PURPOSE OF THE COMPREHENSIVE PLAN AND
ORDINANCE.

6. State any and all facts that support your position that you are seeking the least relief necessary to lessen or eliminate the hardship (for example, why there are no viable alternatives to your proposed plan).

THE LEAST RELIEF NECESSARY IS REQUESTED FOR MINIMUM LOT AREA ONLY.

7. If you are seeking a USE VARIANCE, set forth all facts that demonstrate that the Property cannot have any beneficial use if you are required to use it in a manner allowed in the zoning district.

8. If you are seeking a DIMENSIONAL VARIANCE, set forth all facts that indicate that if the variance is not granted, the hardship the owner/applicant will suffer is more than a mere inconvenience.

IF DENIED, THE OWNER WOULD SUFFER A HARDSHIP BEYOND A MERE INCONVENIENCE
BY NOT REALIZING THE HIGHEST AND BEST USE FOR THIS LOT IN THE R-2 ZONE. A TWO
FAMILY IS CONSISTENT WITH THE INTENT AND PURPOSE OF THE COMPREHENSIVE PLAN
AND ORDINANCE FOR THE R-2 ZONE.

REFERENCE:

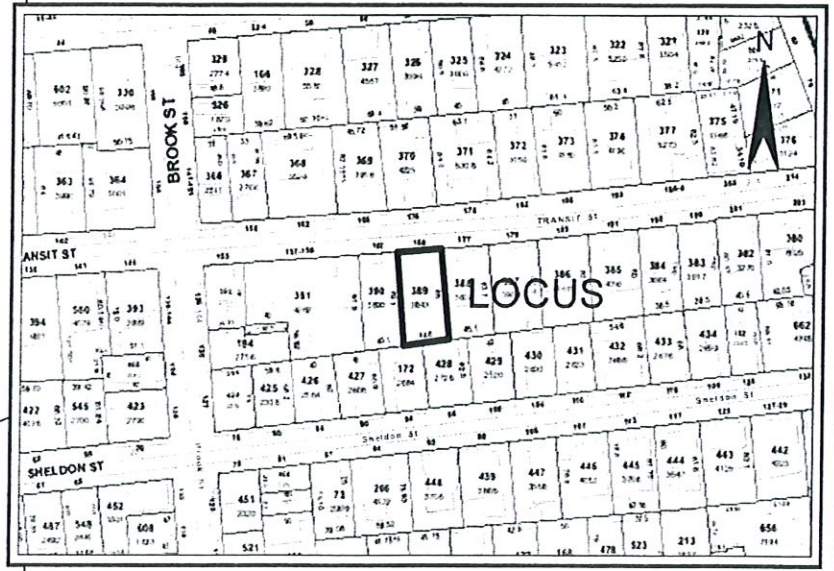
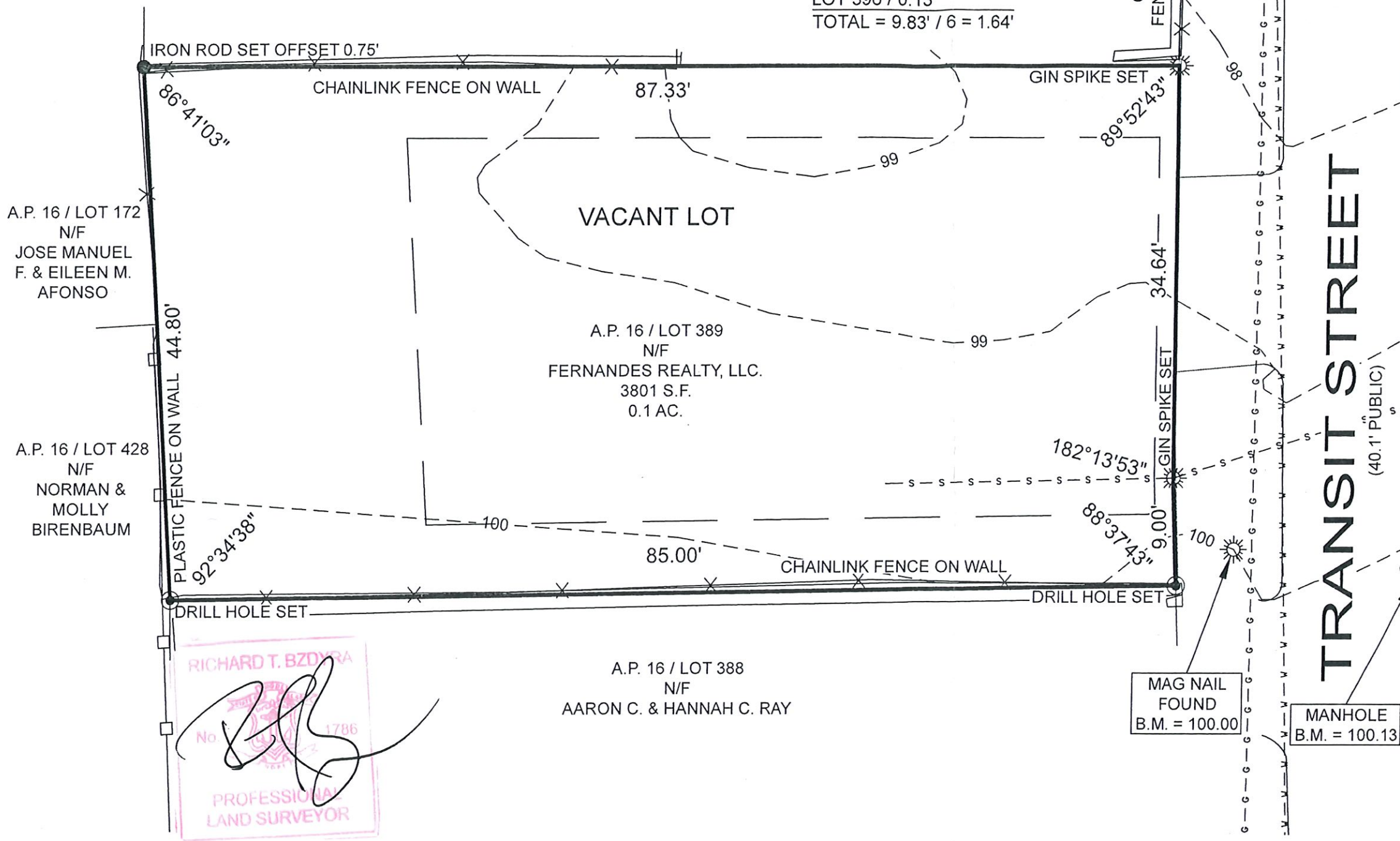
1. DEED BK. 10762 PG. 252



AVERAGE ALIGNMENT:

LOT 392 / 0.46'
 LOT 391 / 0.13'
 LOT 390 / 5.14'
 LOT 388 / 1.74'
 LOT 387 / 2.25'
 LOT 396 / 0.13'
 TOTAL = 9.83' / 6 = 1.64'

A.P. 16 / LOT 390
 N/F
 FERNANDES REALTY, LLC.



LOCUS MAP

ZONING DISTRICT R-2

MINIMUM LOT AREA NONE
 MINIMUM LOT FRONTAGE NONE
 MINIMUM SETBACKS: FRONT 1.64 FT.
 SIDE 6 FT.
 REAR 21.84 FT.
 TOTAL MAXIMUM IMPERVIOUS SURFACE COVERAGE: 65%
 MAXIMUM IMPERVIOUS SURFACE COVERAGE REAR YARD: 50%
 MINIMUM CORNER SIDE SETBACK: SAME AS FRONT SETBACK
 ARTICLE 15-1 TREE CANOPY COVERAGE 30%

BOUNDARY STAKE-OUT SURVEY

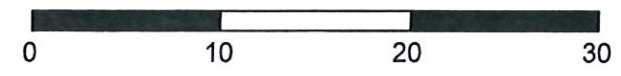
A.P. 16 / LOT 389
 169 TRANSIT STREET
 PROVIDENCE, R.I. 02906
 SCALE: 1"=10' DATE: JULY 1, 2020

PREPARED FOR:
BAHMAN JALILI
 108 ENDEAN DRIVE, WALPOLE MA. 02032
 PHONE: (401) 641-2244

PREPARED BY:
OCEAN STATE PLANNERS, INC.
 1255 OAKLAWN AVENUE, CRANSTON, RI 02920
 PHONE: (401) 463-9696 info@osplanners.com

JOB NO. 9654 / DWG. NO. 9654 - (AJB)

GRAPHIC SCALE / 1" = 10'



SURVEY CLASSIFICATION:

THIS SURVEY HAS BEEN CONDUCTED AND THE PLAN HAS BEEN PREPARED PURSUANT TO SECTION 9 OF THE RULES AND REGULATIONS ADOPTED BY THE RHODE ISLAND STATE BOARD OF REGISTRATION FOR PROFESSIONAL LAND SURVEYORS ON NOVEMBER 25, 2015, AS FOLLOWS:

TYPE OF BOUNDARY SURVEY: MEASUREMENT SPECIFICATION:

LIMITED CONTENT BOUNDARY SURVEY CLASS I

THE PURPOSE FOR THE CONDUCT OF THE SURVEY AND FOR THE PREPARATION OF THE PLAN IS AS FOLLOWS:

TO ESTABLISH AND STAKE RECORD BOUNDARY LINES.

BY: *[Signature]* DATE: 7/02/2020

BY: RICHARD T. BZDYRA, PLS; LICENSE #1786; COA # LS-A60



200FT RADIUS PLAN

AP16 LOT 389-169 TRANSIT ST

Note: All Parcels Within AP16



Loddie
3/2021







