

# CITY OF PROVIDENCE ZONING BOARD OF REVIEW

DEPARTMENT OF INSPECTION + STANDARDS

444 Westminster Street, 1<sup>st</sup> Floor

Providence, Rhode Island 02903

(401) 680-5375

## APPLICATION FOR VARIANCE AND/OR SPECIAL USE PERMIT

### INSTRUCTIONS

#### ▪ **General application requirements:**

- Applications to the Zoning Board shall be typewritten.<sup>1</sup>
- Applications must be signed by the Applicant and the Owner. ***An applicant must be a person with a financial interest in the property, not an architect, engineer, draftsman, contractor, or attorney.*** Examples of a non-owner applicant include a current or potential tenant or purchaser.
- All applicants for a **variance** must also complete **Appendix A** to the application.
- All applicants for a **special use permit** must also complete **Appendix B** to the application.

#### ▪ **Pre-application review:**

Applications must be complete and accurate. A pre-application review of the application and materials is required before final submission. This review may be completed by electronic mail or in person, by appointment only.

- For pre-application review, please contact the Secretary to the Board and the Zoning Assistant via email including draft applications and all required attachments in PDF format:  
Secretary to the Zoning Board: Alexis Thompson, [athompson@providenceri.gov](mailto:athompson@providenceri.gov)  
Zoning Assistant: Boupha Sath, [bsath@providenceri.gov](mailto:bsath@providenceri.gov)
- If you wish to make an appointment to review the application in person, contact Zoning Assistant Boupha Sath for scheduling.

Please note that the Board and staff accept no responsibility for correcting or completing any application. Nor is the staff permitted to provide specific advice or recommendations regarding any particular application. However, staff may be able point out deficiencies before the finalized application is submitted, and to assist in explaining the application process, requirements, and general content requirements.

#### ▪ **Concurrent Applications:**

If your proposal requires review by another board or commission, you must obtain that board or commission's review before submitting an application for a zoning variance or special use permit. See Providence Zoning Ordinance Section 1800D. See also R.I. General Laws § 45-23-61 (regarding submission of proposed subdivisions to City Plan Commission).

#### ▪ **Legal counsel and professional representatives:**

There is no requirement that applicants be represented by legal counsel either during the application process or when appearing before the Board. While the Zoning Board does not recommend either for or against the hiring of legal counsel, the Board does caution all applicants that zoning law can be complex. Applicants may choose to have an architect, draftsman, traffic engineer, zoning, or real estate expert testify at the hearing before the Board. **However, the applicant must still appear at the hearing and offer the presentation/testimony of the witness.**

*\*\*Zoning Board members and staff are not permitted to make referrals or recommendations regarding legal or other professionals.*

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<sup>1</sup> Handwritten applications will not be accepted. However, the City abides by the Americans with Disabilities Act and will provide assistance to those who are disabled thereunder.

**ZONING BOARD INSTRUCTIONS, CONTINUED:**  
**CHECKLIST OF SUPPORTING DOCUMENTATION REQUIRED FOR APPLICATION**

The following documents must be provided WITH your application. An application will not be considered “complete” until all documents and the filing fee are submitted.

\_\_\_\_\_ **DEEDS:** The most current deed(s) on file in the office of the Recorder of Deeds

\_\_\_\_\_ **PLANS:**

- One complete set of plans (preferably 11x17 size) with all applicable dimensions and notes legibly notated (scaled architectural drawings of the proposed building(s) or alteration(s); site plans; parking plans, landscaping plans, etc.). Your plans should detail **exactly** what you intend to do.
- For any application related to signs/signage, include 3 scaled representations of the proposed signage in color, including a scaled drawing representing the sign in relationship to all principal and accessory structure(s).
- **All plans must be signed by the author and must contain the author’s full name, address and telephone number.**

**ABUTTER INFORMATION:**

\_\_\_\_\_ One 200’ radius plan drawn from all corners of the lot or lots in question. THE PLAN SHOULD BE SCALED SUCH THAT ALL REQUIRED INFORMATION IS LEGIBLE WHEN PRINTED AT 11x17 OR 8½ x11 SIZED SHEETS. Required information for all lots within the 200’ radius should include the following:

- Lot numbers, street address numbers, owners’ names, building footprints (if any), present use (example: parking lot, vacant lot, gas station, residential including number of dwelling units, etc.), and zoning district boundaries (including overlay districts).

*\* Please note: If the 200’ radius line intersects or tangentially touches any lot(s), such lot(s) must be included fully within the radius. (see sample below on page 3 of Instructions + Fees)*

\_\_\_\_\_ One list corresponding to all properties within the 200’ radius plan containing the following information, consistent with the latest data available in the office of the Providence Tax Assessor:

- The plat and lot number of each property within the 200-foot radius
- The corresponding names and MAILING addresses, including zip codes, of all property owners of each plat and lot number listed.

\_\_\_\_\_ Two sets of mailing labels with names and full MAILING ADDRESSES of each property owner within the 200-foot radius.

**IMAGES:**

\_\_\_\_\_ Four photographs of the Property taken from different angles, taken within seven (7) calendar days of the filing of the complete application. If there are any changes to the Property between the filing of the application and the date of the hearing, the applicant must submit at the hearing photographs reflecting any such changes.

**ZONING BOARD INSTRUCTIONS, CONTINUED:  
APPLICATION FEE SCHEDULE**

The application fee consists of an advertising fee and a processing fee, provided for by Ordinance.

**A. Advertising Fee for each application \$115.00**

If the application must be re-advertised (e.g. due to a continuance of the hearing, amendment or modification of an application), the applicant must pay an additional advertisement fee.

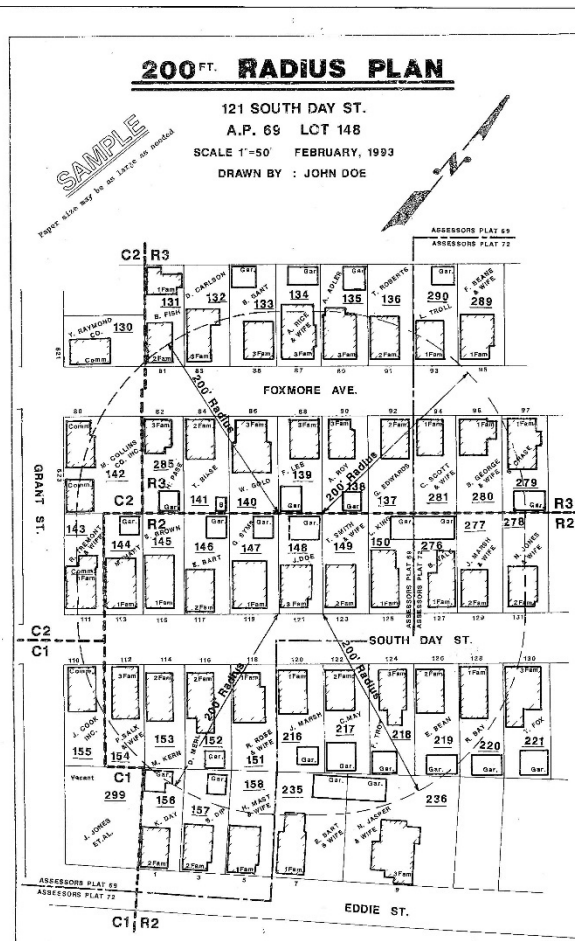
**B. Processing fees for each application:**

One Family Dwelling	<b>\$175.00</b>
Two Family Dwelling	<b>\$345.00</b>
Three Family Dwelling	<b>\$430.00</b>
Multi-family Dwelling -	
For first four units	<b>\$520.00</b>
For each additional unit over four	<b>\$ 80.00</b>
All other uses	<b>\$870.00</b>

***Where there are mixed use codes, the higher fee shall govern.***

In no case shall the sum of the advertisement fee and the processing fee exceed two thousand six hundred (\$2,600.00) dollars. **MAKE CHECK PAYABLE TO: PROVIDENCE CITY COLLECTOR.**

**SAMPLE RADIUS PLAN**



**CITY OF PROVIDENCE  
ZONING BOARD OF REVIEW**

**APPLICATION FOR VARIANCE OR SPECIAL USE PERMIT**

**Check Each Type Zoning Relief Sought:**

- 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

If a section of the application is not applicable, please indicate this by using N/A in that field.

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**Applicant:** \_\_\_\_\_ **Applicant Mailing Address**  
**Email:** \_\_\_\_\_ **Street:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

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**Owner:** \_\_\_\_\_ **Owner Mailing Address**  
**Email:** \_\_\_\_\_ **Street:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

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**Lessee:** \_\_\_\_\_ **Lessee Mailing Address**  
**Email:** \_\_\_\_\_ **Street:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

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**Attorney:** \_\_\_\_\_ **Attorney Mailing Address**  
**Email:** \_\_\_\_\_ **Street:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

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**Does the proposal require review by any of the following:**

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

**1. Street Address of Subject Property:** \_\_\_\_\_  
**Plat and Lot Numbers of Subject Property:** \_\_\_\_\_

2. **Base Zoning District(s):** \_\_\_\_\_  
**Overlay District(s):** \_\_\_\_\_

3a. **Date owner purchased the Property:** \_\_\_\_\_

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

4. **Dimensions of each lot:**

Lot # _____	Width _____	Depth _____	Total area _____ sq. ft.
Lot # _____	Width _____	Depth _____	Total area _____ sq. ft.
Lot # _____	Width _____	Depth _____	Total area _____ sq. ft.
Lot # _____	Width _____	Depth _____	Total area _____ sq. ft.

5a. **Size of existing structure(s) located on the Property:**

<u>Principal Structure:</u>	<u>Accessory Structure:</u>
Area of Footprint _____	Area of Footprint _____
Overall Height _____	Overall Height _____
# of Stories _____	# of Stories _____

5b. **Size of proposed structure(s) located on the Property:**

<u>Principal Structure:</u>	<u>Accessory Structure:</u>
Area of Footprint _____	Area of Footprint _____
Overall Height _____	Overall Height _____
# of Stories _____	# of Stories _____

6a. **Existing Lot Coverage:**

Building Coverage (area of all roofed structures) \_\_\_\_\_  
Total Impervious Coverage Area (area of all roofed structures and impervious surfaces) \_\_\_\_\_  
Rear Yard Impervious Coverage (area of structures and impervious surface in rear yard) \_\_\_\_\_  
Front Yard Impervious Coverage (area of structures and impervious surface in front yard) \_\_\_\_\_

6b. **Proposed Lot Coverage:**

Building Coverage (area of all roofed structures) \_\_\_\_\_  
Total Impervious Coverage Area (area of all roofed structures and impervious surfaces) \_\_\_\_\_  
Rear Yard Impervious Coverage (area of structures and impervious surface in rear yard) \_\_\_\_\_  
Front Yard Impervious Coverage (area of structures and impervious surface in front yard) \_\_\_\_\_

7a. **Present Zoning Use of the Property:** \_\_\_\_\_

7b. **Legal Zoning Use of the Property as recorded in the Dept. of Inspection & Standards:**  
\_\_\_\_\_

8. **Proposed Zoning Use of the Property:** \_\_\_\_\_

9. **Number of Parking Spaces:**

# of existing spaces \_\_\_\_\_ # of proposed spaces \_\_\_\_\_

10. **Are there outstanding violations concerning the Property under any of the following:**

\_\_\_\_ Zoning Ordinance      \_\_\_\_ RI State Building or Property Maintenance Code(s)

**11a. List all Zoning Ordinance Sections from which a variance is sought:**

**Section Number    Section Title + Quantity of relief, if applicable (eg. 4' setback where 6' required)**

_____	_____
_____	_____
_____	_____
_____	_____

**11b. Identify the section(s) of the Zoning Ordinance that provide for the special use permit, and list all section(s) which provide Use Standards for the proposed Special Use(s):**

**Section Number    Section Title**

_____	_____
_____	_____

**12. Summarize any changes proposed for the Property (use, construction/renovation, site alteration):**

\_\_\_\_\_

*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. As indicated on the instructions page, this application may not be signed by an attorney on behalf of their client(s).***

**Owner(s):**

**Applicant(s):**

\_\_\_\_\_  
*Type Name*

\_\_\_\_\_  
*Type Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Type Name*

\_\_\_\_\_  
*Type Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Signature*

***All applicable requirements listed and described on the Instruction Sheet shall be met or this application will not be considered complete.***

## APPENDIX A

### APPLICATION FOR VARIANCE(S)

Rhode Island General Laws § 45-24-41(d) and (e) require 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(a)(16);
2. That the hardship is not the result of any prior action of the applicant;
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; and
4. (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, meaning that the relief sought is minimal to a reasonable enjoyment of the permitted use to which the property is proposed to be devoted.

**Please provide the following information:**

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

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2. **Specify all unique characteristics of the land or structure that cause the hardship:**

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3. (a) **Is the hardship caused by an economic disability?** Yes \_\_\_\_\_ No \_\_\_\_\_  
(b) **Is the hardship caused by a physical disability?** Yes \_\_\_\_\_ No \_\_\_\_\_  
(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 \_\_\_\_\_

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

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5. 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:

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6. 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:

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***IF MORE ROOM IS NEEDED TO ANSWER ANY OF THE ABOVE QUESTIONS, PLEASE SUBMIT AN  
ADDENDUM TO THIS APPENDIX WITH COMPLETE RESPONSES.***



## APPENDIX B

### APPLICATION FOR SPECIAL USE PERMIT

In accordance with Rhode Island General Laws § 45-24-42(b), Section 1901 of the Zoning Ordinance requires that the Applicant for a special use permit demonstrate:

1. That the proposed special use is set forth in the ordinance and complies with the applicable use standards for the authorization of a special use permit;
2. That the proposed special use will not substantially injure the use and enjoyment of nor significantly devalue neighboring property; and
3. That the proposed special use will not be detrimental or injurious to the general health or welfare of the community.

**Please provide the following information:**

1. **Indicate the Ordinance section(s) which provide Use Standards for the proposed Special Use(s); and State all facts that demonstrate that the proposed special use will be in conformance with the Use Standards for the proposed Special Use(s):**

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2. **State all facts that demonstrate that the proposed special use will not substantially injure the use and enjoyment of neighboring property and will not significantly devalue neighboring property:**

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3. **State all facts that demonstrate that the proposed special use will not be detrimental or injurious to the health or welfare of the community:**

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***IF MORE ROOM IS NEEDED TO ANSWER ANY OF THE ABOVE QUESTIONS, PLEASE SUBMIT AN ADDENDUM TO THIS APPENDIX WITH COMPLETE RESPONSES.***