ZONING BOARD OF REVIEW

444 Westminster Street, 1st Floor
Providence, Rhode Island 02903
(401) 680-5375 or (401) 680-5376

APPLICATION FOR VARIANCE AND/OR SPECIAL USE PERMIT

INSTRUCTIONS

- Submit **two** typewritten applications.[1]

- Applications must be signed by the Applicant and the Owner. ***An applicant must be a person with a financial interest in the property, not the architect, engineer, draftsperson, contractor, or attorney.*** Examples 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.

- APPLICATIONS MUST BE COMPLETE AND ACCURATE. BEFORE YOU MAKE THE REQUIRED COPIES, SUBMIT YOUR ORIGINAL APPLICATION AND ATTACHMENTS (SEE BELOW) TO THE SECRETARY OF THE BOARD FOR PRELIMINARY REVIEW. Review of Applications is by APPOINTMENT ONLY. 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.

- If your proposal requires review by another board or commission, you must obtain the 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. Gen.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, draftsperson, 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.

- Zoning Board approval of an application does not automatically indicate that you will receive a building permit. To shorten the length of the process, it is strongly recommended that you initiate the building permit review process by submitting your construction plans to the DIS when you submit your application for a variance or special use permit. Your plans should detail **exactly** what you intend to do.

- Zoning Board approval **does not** address issues such as leaching systems/sewers, flood plain, fire safety, DEM Wetlands and/or Coastal Resources Management Commission requirements.

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[1] 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.

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.

____ Most current deed on file in the office of the Recorder of Deeds

____ Three (3) complete sets of plans (scaled architectural drawings of the proposed building(s) or alteration(s); site plans; parking plans, landscaping plans, etc.).

____ For all proposals that will provide more than four (4) parking spaces, three (3) sets of on-site parking plans showing parking spaces, proposed landscaping and curb cut(s).

____ For all proposals for signs/signage: three (3) colored and scaled representations of the proposed signage, including a drawing representing scaled size in relationship to the appurtenant structure(s).

____ Ten (10) 200' radius plans drawn to a scale of 1"= 50' from all corners of the lot or lots in question. Show all lot numbers, owners' names, street numbers and buildings (if any) on each lot within the radius, present use (example: parking lot, vacant lot, gas station, number of families, etc.) zone boundaries (including overlay districts), tax assessor's plat boundaries and indicate new construction and additions. If the 200' radius line intersects or is close to any lot(s) such lot(s) must be included fully within the radius. **(see attached sample)**

____ Two (2) copies of a list containing the following information, consistent with the latest data available in the office of the Providence Tax Assessor:

a. Each plat and lot number that appears within the 200 foot radius plan

b. The corresponding names and MAILING addresses, including zip codes, of all property owners of each plat and lot number listed

____ Two (2) sets of mailing labels with names and full mailing addresses of each property owner within the 200 foot radius

____ **Four (4) 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.

All plans must be signed by the author and must contain the author's full name, address and telephone number.

APPLICATION FEES

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

A.	**Advertising Fee for each application:** 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.	**$115.00**
B.	**Processing fees for each application:**	
	One Family Dwelling	**$175.00**
	Two Family Dwelling	**$345.00**
	Three Family Dwelling	**$430.00**
	Multi-family Dwelling	
	For first four units	**$520.00**
	For each additional unit over four	**$ 80.00**
	All other uses	**$870.00**

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.

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

Applicant: _____ Address _____
Zip Code _____

E-mail _____
Phone _____ _____
Home/Office *Mobile (Cell*)

Owner: _____ Address _____
Zip Code _____

E-mail _____
Phone _____ _____
Home/Office *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:** _____
Street Address

2. **Zoning District(s):** _____
Special purpose or overlay district(s): _____

3a. Date owner purchased the Property: _____

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

3. **Dimensions of each lot:**
   Lot # _____ Frontage _____ depth _____ Total area _____sq. ft.
   Lot # _____ Frontage _____ depth _____ Total area _____sq. ft.
   Lot # _____ Frontage _____ depth _____ Total area _____sq. ft.

4. **Size of each structure located on the Property:**

   Principal Structure: Total gross square footage _____
   Footprint _____ Height _____ Floors _____

   Accessory Structure: Total gross square footage _____
   Footprint _____ Height _____ Floors _____

5. **Size of proposed structure(s): Total gross square footage: _____**
   Footprint _____ Height _____ Floors _____

6a. Existing Lot coverage: *(include all buildings, decks, etc.)* _____

6b. Proposed Lot coverage: *(include new construction)* _____

7a. Present Use of Property (each lot/structure):
_____

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

8. **Proposed Use of Property (each lot/structure):**
_____
_____

9. **Number of Current Parking Spaces:** _____

10. **Describe the proposed construction or alterations (each lot/structure):**
_____
_____
_____

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:**
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____

13. Explain the changes proposed for the Property.

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

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):	**Applicant(s):**
_____	_____
Type Name	*Type Name*
_____	_____
Signature	*Signature*
_____	_____
Type Name	*Type Name*
_____	_____
Signature	*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?**

_____
_____
_____

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

_____
_____
_____

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.

_____
_____

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.**

_____
_____
_____
_____
_____
_____
_____

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).**

_____
_____
_____
_____
_____
_____

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.**

_____
_____
_____
_____
_____
_____
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_____
_____
_____

APPENDIX B

APPLICATION(S) FOR SPECIAL USE PERMIT

1. Identify the section(s) of the Ordinance that provides for the special use permit.

_____
_____
_____
_____
_____

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

_____
_____
_____
_____
_____
_____
_____

3. State all facts that demonstrate that the proposed special use will not significantly devalue neighboring property.

_____
_____
_____
_____
_____
_____
_____
_____

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

_____
_____
_____
_____
_____
_____
_____

IF THE APPLICANT IS AN EDUCATIONAL OR HEALTH CARE INSTITUTION, COMPLETE PAGE 10 BELOW

HEALTH CARE INSTITUTIONS OR EDUCATIONAL FACTILITIES ONLY

5. Date on which you last filed an Institutional Master Plan ("IMP") with the City:
_____

Date on which the City issued final approval of your most recent IMP:
_____

6. Specify the manner in which the proposed use conforms with your IMP.
_____
_____
_____

7.a. Identify all dimensional requirements that apply to the proposed institutional use (you may refer to sections of the Ordinance).
_____
_____
_____
_____

b. Does the proposed use comply with all the dimensional requirements listed above?

_____ Yes _____ No

c. If your answer to subsection b is "no," state why the special use cannot be established without a dimensional variance.
_____
_____
_____

8. Identify the sections of the Ordinance that govern parking for the proposed use.
_____
_____

Describe the manner in which the institution is providing for parking for the proposed use. (or attach proposed parking plan).
_____
_____

9. State why the proposed use cannot be located on your existing property within an institutional district in which the use is permitted.
_____
_____
_____
_____

10. State facts to support that the proposed use is in conformance with the objectives of the Comprehensive Plan. Include references to the specific objectives of the Plan.
_____
_____
_____
_____