

PROVIDENCE CITY PLAN COMMISSION

APPLICATION FOR VARIANCE AND/OR SPECIAL USE PERMIT UNIFIED DEVELOPMENT REVIEW

INSTRUCTIONS

- 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 complete **Appendix A** to the application.
All applicants for a *special use permit* must complete **Appendix B** to the application.

APPLICATIONS MUST BE COMPLETE AND ACCURATE.

Review of Applications with Department of Planning and Development staff is by APPOINTMENT ONLY. Note that the Commission 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.

- **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 Commission. While the Commission does not recommend either for or against the hiring of legal counsel, the Commission 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 Commission.

However, the applicant must still appear at the hearing and offer the presentation/testimony of the witness.

Commission members and staff are not permitted to make referrals or recommendations regarding legal or other professionals.

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.

- _____ Complete sets of plans (scaled architectural drawings of the proposed building(s) or alteration(s); site plans; parking plans, landscaping plans, etc.) as required for minor or major subdivision/development application.
- _____ A 200’ radius plan 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.
- _____ A copy 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

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

**CITY OF PROVIDENCE
CITY PLAN COMMISSION**

**APPLICATION FOR VARIANCE OR SPECIAL USE PERMIT
UNIFIED DEVELOPMENT REVIEW**

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

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. An attachment may be added for additional detail:

13. Explain the changes proposed for the Property. An attachment may be added for additional detail:

The undersigned acknowledge(s) and agree(s) that members of the City Plan Commission 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(d) 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; (Not applicable for variances involving subdivision)
- (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) (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. Attachments may be added if required:

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. 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.

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.

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 PAGES 10 AND 11 BELOW**

HEALTH CARE INSTITUTIONS OR EDUCATIONAL FACILITIES 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.
