Application # _____ #009-24

CITY OF STAMFORD ZONING BOARD OF APPEALS

Stamford Government Center 888 Washington Blvd. P.O. Box 10152 Stamford, CT 06904-2152

Telephone 203.977.4160 - Fax 203.977.4100 - E-mail mjudge@stamfordct.gov

PLEASE PRINT ALL INFORMATION IN INK

(X) Variance(s)() Special Permit() Appeal from D() Extension of T() Gasoline State	Decision of Zoning Enforcer Fime ion Site Approval				
2. Address of affect	cted premises:				
619 FAIRFIELD AVE	:NUE reet	STAMFORD, CT	06902 zip code	•	
Property is located on the	e north () south ()	east () west(X)) side of the str	eet.	
Block: <u>35</u> Zone: <u>R</u> Is the structure 50 years		Sewered Property	(X) yes ()) no	
Corner Lots Only: Inters Within 500 feet of anothe	ecting Street: N/er municipality: No()	A Yes (X) Town of _0	Greenwich	1	-
3. Owner of Property:	TFG Waterside GP, LL	С			
Address of Owner:	c/o Joseph Capalbo, 1	100 Summer Street	Zip _	06905	
Applicant Name:	TFG Waterside GP, LL	С			
Address of Applican	t <u>c/o Joseph Capalbo, 1</u>	100 Summer Street	Zip _	06905	fro str
Agent Name: Jose	eph Capalbo				
Address of Agent:	1100 Summer Street, St	amford	Zip _	06905	
EMAIL ADDRESS: _ (M	JJCLAW@CSHOR ust be provided to receive o	E . C O M comments from letter	s of referral)		
Telephone # of Agent 203-324-8882					

(CONTACT IS MADE WITH AGENT, IF ONE)

4. List all structures and uses presently existing on the affected property:
There is presently existing a legal non-conforming two-family dwelling on a parcel of land in the R-71/2 zone with
an area in excess of an acre.
5. Describe in detail the proposed use and give pertinent linear and area dimensions:
Applicant is proposing to remove the non-conforming use and subdivide the property into three conforming
single family parcels.
VARIANCES (complete this section for variance requests only) See a Zoning Enforcement Officer for help in completing this section
Variance(s) of the following section(s) of the Zoning Regulations is requested (provide detail of what is sought per the applicable section(s) of the Zoning Regulations):
Applicant is requesting variances of Section 3, Definitions of the Stamford Zoning Regulations, specifically
"Accessway" to permit an accessway of 25 feet in lieu of the required 50 feet, and "Lot Accessway" to permit three
Accessway Lots in lieu of the limit to one and to permit an Accessway Lot in the R-71/2 zone.
to permit 3 lots to be serviced by one accessway
ZONING ENFORCEMENT APPROVAL For Submission To Zoning Board Of Appeals Sheet Of Of
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Variances of the Zoning Regulations may be granted where there is unusual hardship in the way of carrying out the strict letter of the Regulations solely with respect to a parcel of land where conditions especially affect such parcel but do not affect generally the district in which it is situated. In your own words:						
A. Describe the unusual hardship in being unable to carry out the strict letter of the Zoning Regulations:						
The subject parcel was a part of a subdivision dating back to 1963. The parcel is in excess of an acre of land in the						
R-71/2 zone that can only be accessed through the existing 25-foot accessway. The entire area is developed in						
accordance with R-71/2 standards, but the subject parcel, because of the timing of its creation and unusual shape,						
cannot be developed accordingly without the requested variances.						
B. Explain why the variance(s) is/are the minimum necessary to afford relief:						
The variance will permit the subdivision of the parcel into three (3) parcels. All three parcels will be considered						
oversized for the area and generally larger than the surrounding parcels.						
C. Explain why granting of the variance(s) would not be injurious to the neighborhood.						
The applicant will be eliminating an existing non-conformity (a 2-family dwelling in the R-71/2 zone) and replacing						
it with three (3) conforming parcels.						
SPECIAL PERMIT (Complete this section only for special permits)						
SPECIAL PERIVIT IS requested as authorized by Occitor(s)	of					
the Zoning Regulations. Provide details of what is being sought:						
N/A						
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	_					

SIGNATURE REQUIRED FOR ALL APPLICATONS

Julia	
Signature of : (X)Agent () Applicant Date Filed:	()Owner
Zoning Enforcement Officer Comments:	
DECISION OF THE ZONING ENFORCEMENT OFFICER (Complete this section only for appeals of zoning enforcement officer decision:	
DECISION OF THE ZONING ENFORCEMENT OFFICER dated	is appealed because:
N/A	



CITY OF STAMFORD ZONING BOARD OF APPEALS

APPLICATION PACKET

Board Members

Joseph Pigott, Chair

Lauren Jacobson

George Dallas

Alternate

Ernest Matarasso Matthew Tripolitsiotis Jeremiah Hourihan

Land Use Administrative Assistant **Mary Judge**

ALL APPLICANTS MUST MAKE AN APPOINT ENFORCEMENT ØFFIGEFOR PLAN REVIEW	
LEAST TWO WEEKS PRIOR TO THE APP	
Zoning Enforcement:	Date: 1 31 24
Is the project situated in the coastal boundary?	Yes (No ()
Is the project exempt from the coastal regulation? Yes() Exemption #	_No () N/A ()
Environmental Protection:	Date:
CAM Review by:	

ZONING BOARD

ZBA



