

## CITY OF WARWICK

ZONING BOARD OF REVIEW WARWICK, RHODE ISLAND 02886 (401) 738-2000

WARWICK ZONING BOARD OF REVIEW

PETITION NO.

## City of Warwick ZONING BOARD OF REVIEW

Application for Special Use Permit, Variance or Appeal

	Date September 2022
The undersigned hereby applies Review for the following.	to the Warwick Zoning Board of
( ) SPECIAL USE PERMIT (X) VARIANCE ( ) APPEAL from the Planning H ( ) AMENDMENT TO A PREVIOUSLY Debra Zarrella, Trustee of the De Applicant: Trust dated 10/24/16	GRANTED RESOLUTION
Owner: Same as applicant	Address:
Lessee:	Address:
1. Ownership Tenure	
DATE of PURCHASE of the above some of the above some some some some some some some som	stated property by the CURRENT
Will ownership of said property OWNER TO the APPLICANT for deve	y be transferred by the CURRENT elopmental purposes? no
2. Location of Premises O Haswil	l Street .
 3. Assessor's Plat 36	reet No. Name of Street  1 137
4. Dimensions of lot 89.39' Frontage	lat NO. Lot No.
5. Zoning District in which pr	remises are located A40

6. DEVELOPMENTAL STATUS AND PROPOSAL	•
Are there any buildings on the premises at present? no	
If YES, how many buildings?	
Identify the size, height and use of each building:	·
(1)	
(2)	
(3)	······································
**Note: Use additional sheet(s) of paper, if necessary.	
7. State legal use of premises vacant lot	
8. Have plans for the proposed construction activities/chause for any existing and proposed building(s) been submitted the Warwick Building Official?	inge of d to
Yes ( ) No (x ) Does not apply ( )	
If yes, has a building permit been refused? Yes ( ) No	( x ·)
9. Total number of units residential/commercial one residential	
10. Type of Sewer System - Public x Private	
10. Type of Sewer System - Public x Private Septic Cesspool Connected?  11. Is the subject property located in a flood zone? no	
If so, what flood zone?	***************************************
12. Is the subject property located in a Historic District?  If so, have you received approval from the Historic District?  Commission?	no trict
13. Does your application require Planning Board approval? If so, have you applied and received approval from the Planning Board?	no
14. SPECIAL USE PERMIT	
A. State proposed use of premises	
B. Give extent of proposed alterations	

C. LIST precise ARTICLE(S) and SECTION ORDINANCE which authorize consideration described in above.	N(S) of the ZONING n of the SPECIAL USE PERMIT
	•
D. Describe how the granting of the SI the requirements of the Zoning Ordinano	PECIAL USE PERMIT will meet ce per Section 906.3 (C)
15. VARIANCES	
A. State proposed use of premises single	e family home
B. Give extent of proposed alterations dwelling	
D. Identify grounds for the proposed V	VARIANCE. As required in
Section 906.3 (A)/906.3 (B) of the Zoni See attached Exhibit	ng Ordinance.
16. APPEALS	
A. Appeal of the Building Official (At notification, violation or corresponden	tach a copy of any denial, ace relating to appeal).
<ol> <li>Date of denial/issuance of per error in enforcement of ordinance.</li> </ol>	mit or date of alleged,20
2. Basis for Appeal (Cite applica ordinance.)	ble provisions of the

B. Appeal to the Warwick Zoning Board of Appeals from an action of the Warwick Planning Board. (Note: Attach all copies of correspondence, plans and the written decision pertaining to the appeal, including any transcript, audiotapes, constituting the record upon which the action appealed was taken, per Section 906.4 (A) of the ordinance.					
Basis for Appeal (Cite applicable ordinance provisions)					
I/We the UNDERSIGNED, swear that all information provided in this APPLICATION is to the best of MY/OUR knowledge complete and correct in every detail.					
Respectfully submitted, (Owner Signature) Debra Zarrella, Trustee of the Debra Zarrella Trust dated 10/24/16 (Address) 20 Gerald's Farm Drive, Exeter, RI 02822					
(Phone) 401-523-2000					
Respectfully submitted, (Applicant Signature) Debra Zarrella, Trustee of the Debra Zarrella Trust dated 10/24/16 (Address) 20 Gerald's Farm Drive, Exeter, RI 02822					
(Phone) 401-523-2000					
Attorney: Name: Sanford J. Resnick, Esq.					
Address: 300 Centerville Road, Summit West, Suite 300, Warwick, RI 02886 Phone: 401-738-4500					
*PLEASE BE ADVISED THAT THE STREET NUMBER MUST APPEAR ON ANY EXISTING STRUCTURE					
*PLEASE NOTE: UNLESS ALL REQUIREMENTS LISTED ON THE INSTRUCTION SHEET ARE COMPLIED WITH, THIS APPLICATION WILL NOT BE ACCEPTED.					
PLEASE BE SURE TO REVIEW INSTRUCTION SHEET CAREFULLY.					
*PLEASE NOTE A SURVEY IS REQUIRED					

## EXHIBIT A to Zoning Application Section 15D

- The hardship from which the Applicant seeks relief is due to the unique characteristics of the subject land or structure and not the general characteristics of the surrounding area, and is not due to the physical or economic disability of the applicant.
- That said 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.
- That the granting of the requested variance will not alter the general characteristic of the surrounding area or impair the intent or purpose of this zoning ordinance or the comprehensive plan of the city.
- That the relief to be granted is the least relief necessary.
- That the hardship that will be suffered by the owner of the subject property if the dimensional variance is not granted shall amount to more than a mere inconvenience, which shall mean that there is no other reasonable alternative to enjoy a legally permitted beneficial use of one's property. The fact that a use may be more profitable or that a structure may be more valuable after the relief is granted shall not be grounds for relief.

## TABLE A DIMENSIONAL RELIEF

	Required	Proposed
Minimum Lot Area	40,000 sq ft	3,824 sq ft
Minimum Frontage	150 ft	47.97 ft
Minimum Lot Width	150 ft	42.47 ft
Minimum Side Yard	30 ft	8.97/9.5 ft
Minimum Rear Yard	40 ft	19.73 ft
Minimum Front Yard	40 ft	20.03 ft