

COMM-2021-0385

EnerGov App. #: \_\_\_\_\_

### City of Hartford Department of Development Services Planning Division

Return Form to the Planning Desk at the  
Licenses & Inspections Division Counter  
860-757-9239  
260 Constitution Plaza  
Hartford, Connecticut 06103-1822



For Assistance Contact Planning Division  
860-757-9040  
250 Constitution Plaza, 4th Floor  
Hartford, Connecticut 06103-1822  
<http://planning.hartford.gov>

# PLANNING AND ZONING APPLICATION

PLEASE CHECK THE ACTION(S) YOU ARE APPLYING FOR:

- Zoning Appeal
- Zoning Permit: Signage/Use/Accessory
- Site Plan
- Subdivision/Lot Line Revision
- Approval of Location
- Zoning Variance
- Zoning Map Change
- Historic Review
- Lot Combination
- Liquor Permit
- Special Permit

Receiving Federal Funds:
<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Demo <input type="checkbox"/> Add. <input checked="" type="checkbox"/> Repair

## 1. PROPERTY INFORMATION

Property Address: 143-145 HOMESTE City: HARTFORD State: CT Zip Code: 06112

Zoning District: (<https://www.hartfordct.gov/Government/Departments/Assessor>) \_\_\_\_\_ Parcel ID: \_\_\_\_\_

Property Owner: EUGENE LEWIS

Property Owner's Address: 9 COOPER DR City: NANUSETT State: NY Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

10954 Email: elewis145@optimum.net

## 2. APPLICANT

Please check if "Applicant" is the same as "Property Owner"

Name of Applicant: \_\_\_\_\_ File Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## 3. PRIMARY POINT OF CONTACT:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**4. PROJECT NARRATIVE**

Describe your application action(s) and provide as much detail as possible. Attach additional pages if necessary:

FRONT STAIR RECONSTRUCTION  
WOOD IN PLACE OF CONCRETE  
FRONT PORCH REMODEL  
REDUCE NUMBER OF WINDOWS FROM 4 TO 2

**\*\* Please complete the following sections as they pertain to the actions you are applying for. \*\***  
**Be sure to sign the application in Section 5 on the last page.**

**A. COMPLETE IF APPLYING FOR ZONING MAP CHANGE:**

Proposed Zone: \_\_\_\_\_

Describe the existing use of land and buildings in the zone change area:

Describe the proposed use of land and buildings in the zone change area:

Reason for this request: \_\_\_\_\_

**B. COMPLETE IF APPLYING FOR ZONING APPEAL:**

Are you an aggrieved party? (Check one):  Yes  No

Permit or Violation number: \_\_\_\_\_

State your reason for appealing the decision of the administrator or enforcement officer :

**C. COMPLETE IF APPLYING FOR ZONING VARIANCE:**

State the particular hardship\* or unnecessary difficulty that prompts this application :

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\*A "hardship" as defined by the *Connecticut State Statutes Section 8-6* whereby "with respect to a parcel of land where, owing to conditions especially affecting such parcel but not affecting generally the district in which it is situated, a literal enforcement of such bylaws, ordinances or regulations would result in exceptional difficulty or unusual hardship." Note that "mere financial loss does not constitute hardship warranting granting of variance [unless] loss is so great as to amount to confiscation of applicant's property, [a] variance might be justified."

**D. COMPLETE IF APPLYING FOR SUBDIVISION, LOT LINE REVISION, OR LOT COMBINATION****Lot Subdivision/Lot Line Revision:**

Number of new lots to be created: \_\_\_\_\_ Area of each of the new lots in square feet \_\_\_\_\_

Street frontage of each of the new lots in feet \_\_\_\_\_

**Lot Combination:**

Address of lots to be combined \_\_\_\_\_

Map/Block/Lot for each property to be combined: Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

(Map/Block/Lot and address information can be found at <http://gis.hartford.gov/parcelviewer/index.html>)

**E. COMPLETE IF APPLYING FOR HISTORIC REVIEW**

**IMPORTANT: HISTORIC COMMISSION APPROVAL MUST FIRST BE OBTAINED BEFORE ANY BUILDING OR DEMOLITION PERMIT WILL BE ISSUED FOR WORK ON HISTORIC PROPERTIES. NO WORK MAY BEGIN UNTIL A BUILDING PERMIT IS ISSUED**

Please check if photographs are included with application (required for certain projects)

Proposed work includes:  Repairs  Addition  New construction  Demolition  Other (specify)

If proposing demolition, provide reason (attach additional pages if necessary):

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Current materials being repaired/replaced: \_\_\_\_\_

Materials/products being used in work: \_\_\_\_\_

**F. COMPLETE IF APPLYING FOR A SIGN PERMIT**

1. Is this sign proposed outside of the Buildingline?  Yes  No  
Maximum extension from the Buildingline: \_\_\_\_\_ ft. \_\_\_\_\_ in.

2. Is this sign proposed outside of the Streetline?  Yes  No  
Maximum extension from the Streetline: \_\_\_\_\_ ft. \_\_\_\_\_ in.

3. Is this sign illuminated?  Yes  No

4. Engineer Name (if any): \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

5. Minimum distance from lowest point of sign to sidewalk: \_\_\_\_\_ ft. \_\_\_\_\_ in.

6. Maximum height of sign from lowest established grade: \_\_\_\_\_ ft. \_\_\_\_\_ in.

7. Distance from the nearest outdoor sign: \_\_\_\_\_ ft. \_\_\_\_\_ in.

8. Square feet of surface for one face of the sign: \_\_\_\_\_ ft. \_\_\_\_\_ in.

9. Wording on the sign (include all words): \_\_\_\_\_

Description of work (attach additional pages if necessary):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** Please submit two copies of all drawings drawn to scale. Sign drawings should include the dimension of the sign. Elevation of building should include the location of proposed and existing signs. Site plans should include the location of proposed and existing signs and their distance from Buildinglines and Propertylines.

**5. SIGNATURE(S)**

*By signing below, I certify that all work will be done in strict accordance with the LOCAL, STATE AND FEDERAL CODES. Further, all work covered by this application has been authorized by the owner of this property. No work shall commence until all determinations have been made and the proper permits have been obtained.*

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Applicant: \_\_\_\_\_

✓ Signature of Property Owner: Eugene Lewis Date: 3/25/21

Printed Name of Property Owner: EUGENE LEWIS

Scales

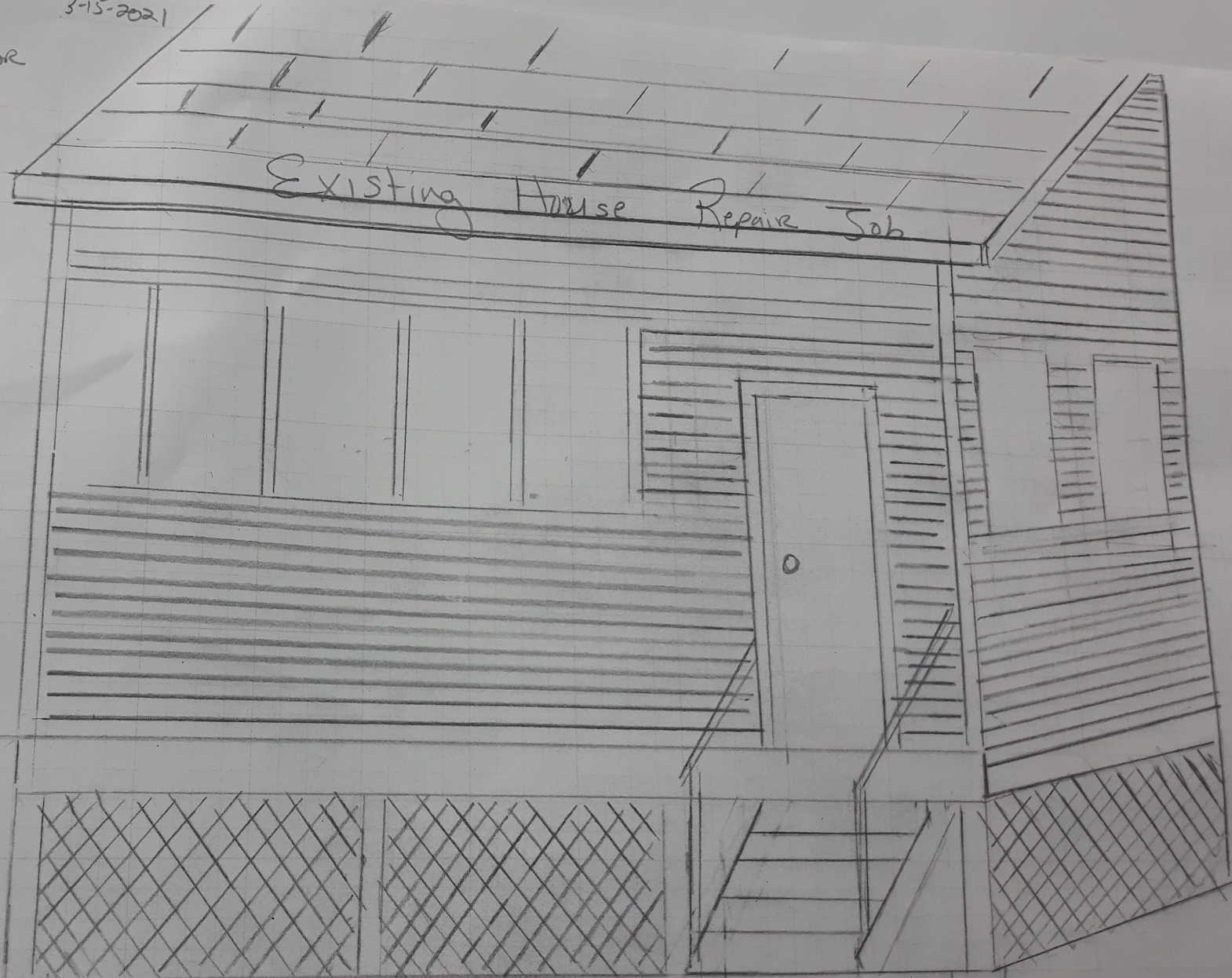
General Contractor

Lic # 005522366

Tommy Scales

(860) 833-9789

3-15-2021



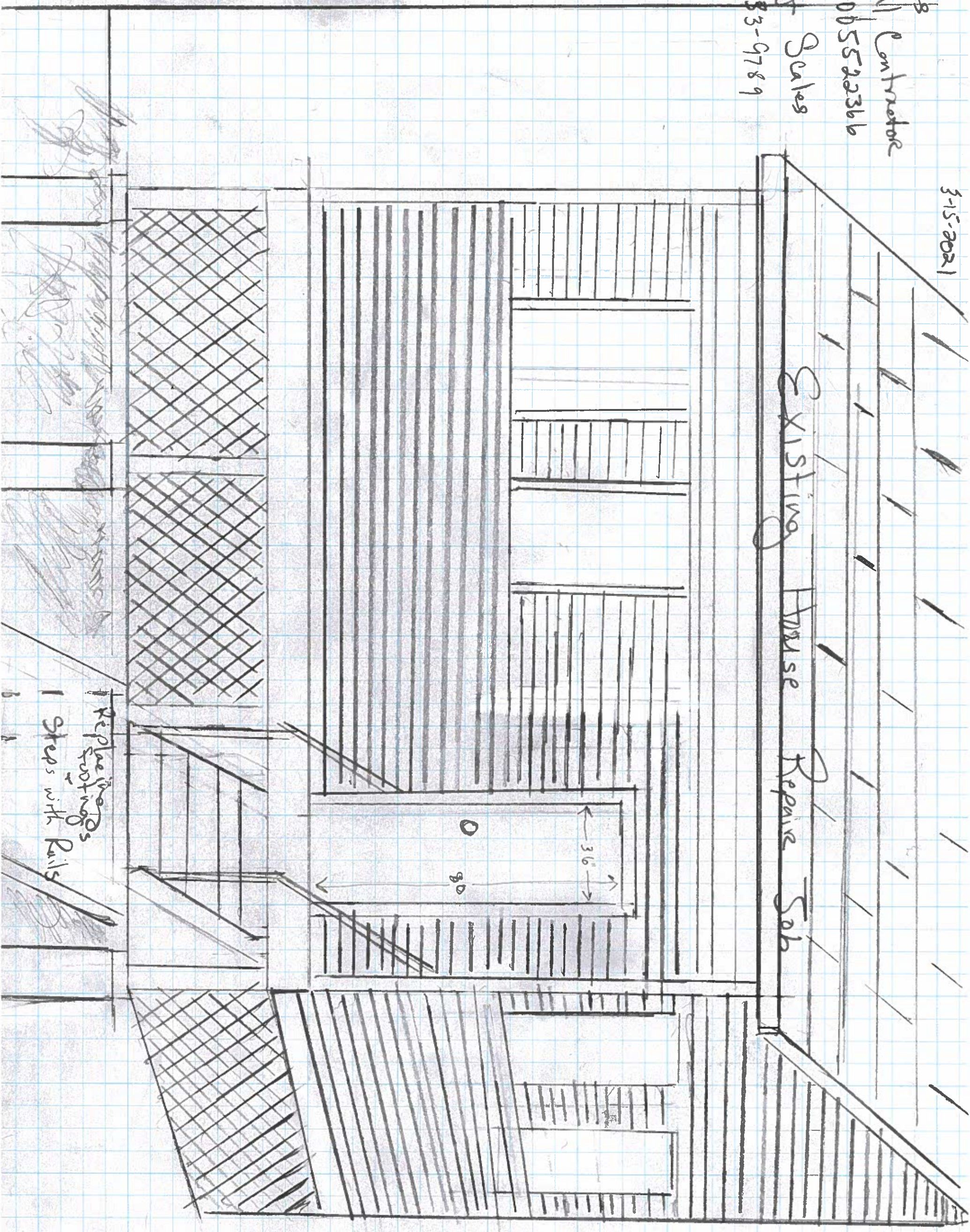
Existing House Repair Job

Replacing  
Footings  
Steps with Rails

Scales  
General Contractor  
Lic # 065522366  
Tommy Scales  
(860) 883-9789

3-15-2021

EXISTING HOUSE REPAIR JOB

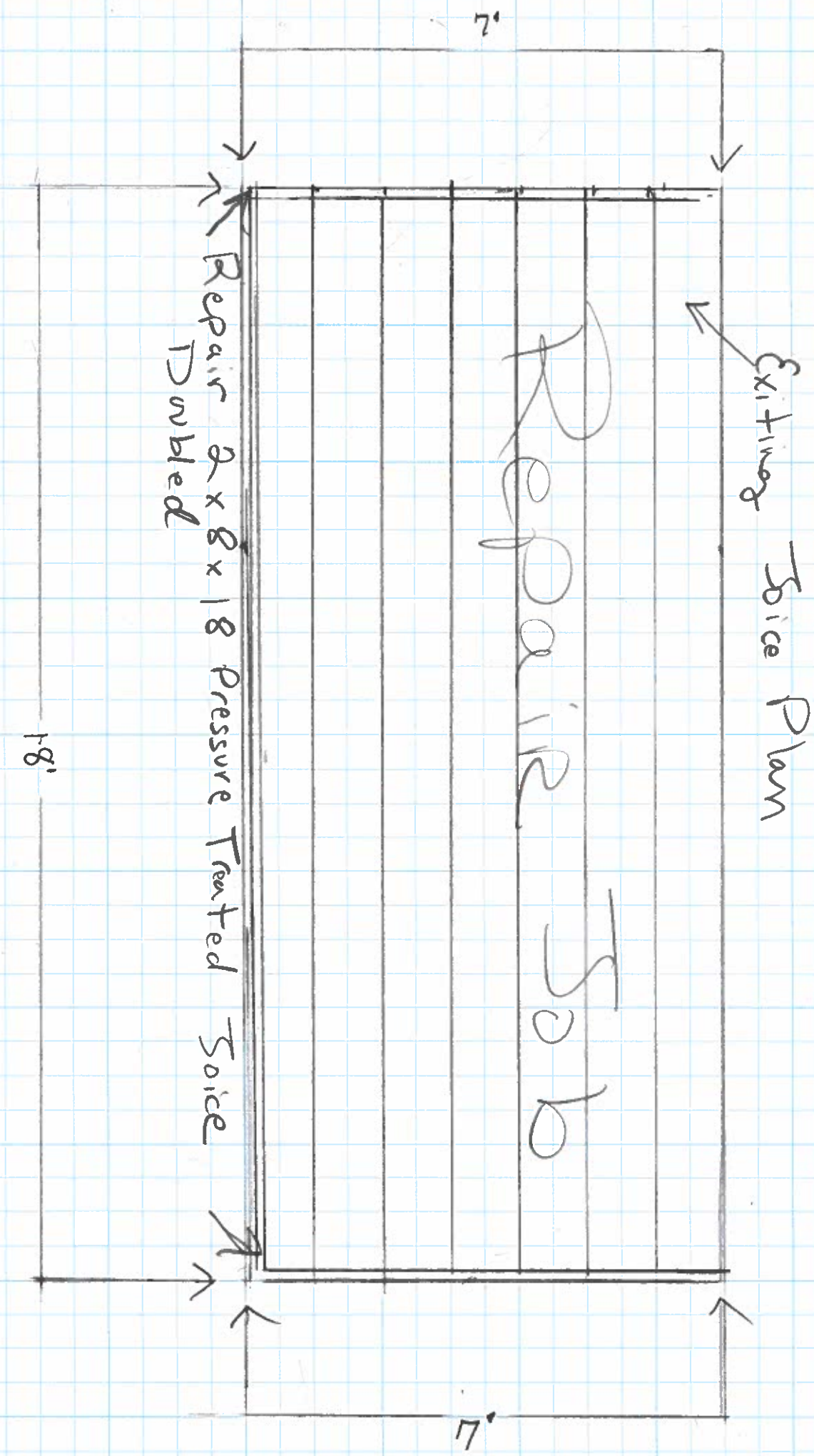


Re place floorings  
Steps with Rails

58

03-15-2021

Seales  
General Contractor  
Lic # 005522366  
Tommy Seales  
(860) 833-9789



18'  
7'

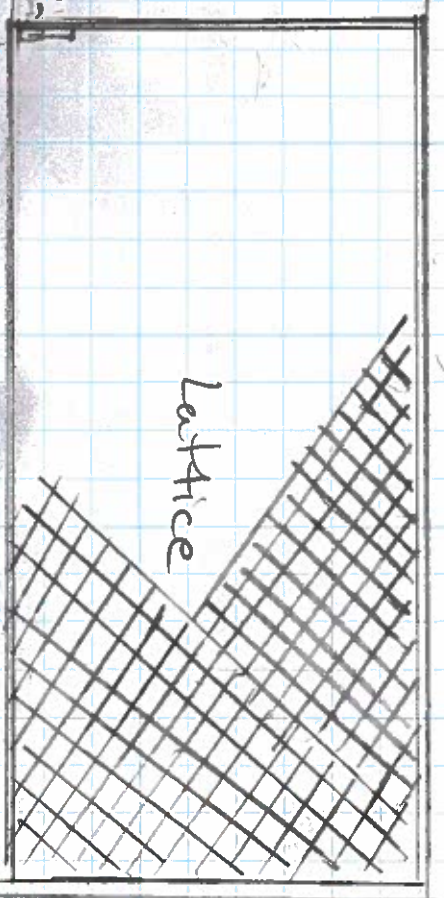
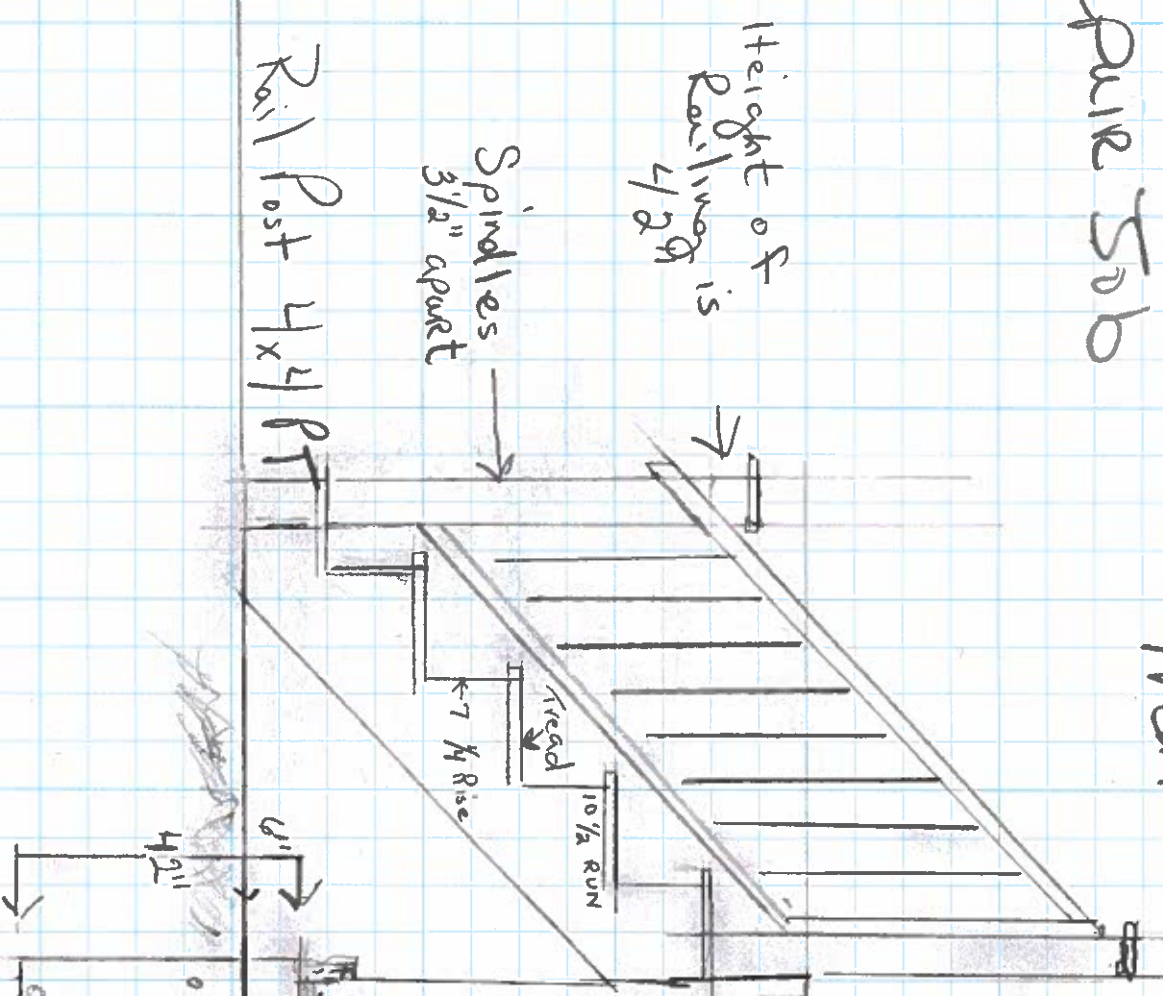
03-15-2021

Scales  
General Contractor  
Lic# 005522366  
Tommy Scales  
(610) 833-9789

No Scale  
Repair Job

All wood is  
Pressure  
Treated

Christina's House





3-15-2021

Seales

General Contractor

Lic # 005522366

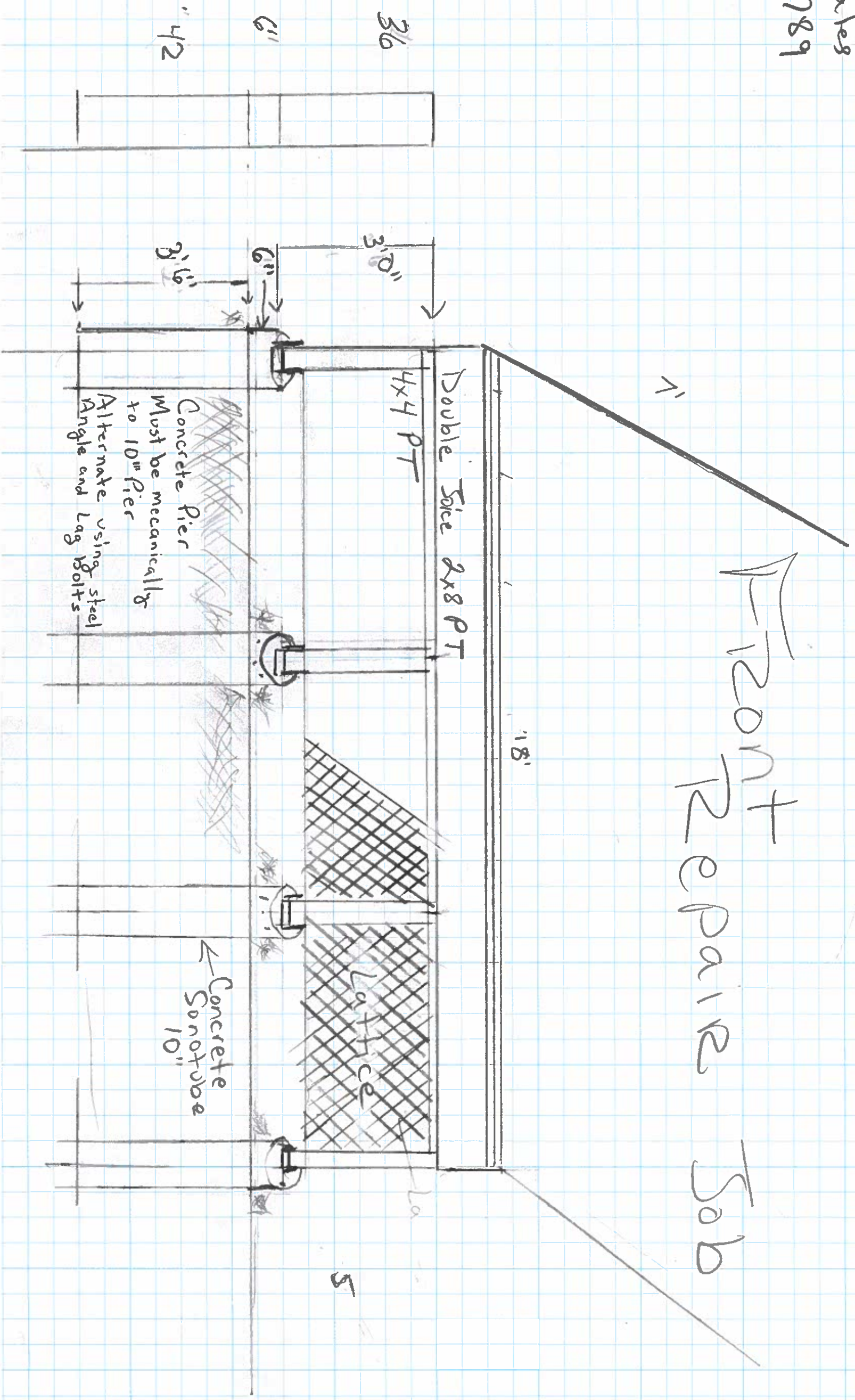
Tommy Seales

(860) 833-9789

5' 11" = 1' 10"

2 of 5

# FRONT Repair Sdb



No Scale  
Repair Job  
Installing new Footing

EYD  
Call Before you Dig

Seales  
General Contractor  
Lic # 005522366  
Tommy Seales  
(860) 833-9789

10/5

