



VARIANCE APPLICATION

LOT 1

CITY OF WORCESTER ZONING BOARD OF APPEALS
 455 Main Street, Room 404, Worcester, MA 01608
 Phone 508-799-1400 Ext. 31440 - Fax 508-799-1406

Fill in information for the Variances (s) you are applying for. Attach additional documentation as necessary.

Lot Area		Front Yard Setback		Rear Yard Setback	
Square footage required:	7,000	Setback required:		Setback required:	
Square footage provided:	5,900	Setback provided:		Setback provided:	
Relief requested:	1,100	Relief requested:		Relief requested:	
Frontage		Side Yard Setback		Exterior Side Yard Setback	
Frontage required:	65	Setback required:		Setback required:	
Frontage provided:	50	Setback provided:		Setback provided:	
Relief requested:	15	Relief requested:		Relief requested:	
Off-street Parking/Loading		Height		Accessory Structure 5-foot Setback	
Parking required:		Height permitted:		Type of structure:	
Parking provided:		Height provided:		Square footage of structure:	
Relief requested:		Relief requested:		Relief requested:	
Loading required:		Other Variances			
Loading provided:		Relief requested:			
Relief requested:		Zoning Ordinance Article & Section:			
Signs		Requirement:			
Area permitted:		Provided:			
Area provided:		Indicate if Variances are being requested for more than one structure or more than one lot. Only complete the sections which pertain to the Variances (s) you are applying for.			
Relief requested:					
Height permitted:					
Height provided:					
Relief requested:					
Setback permitted:					
Setback provided:					
Relief requested:					



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LOT 2

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Fill in information for the Variances (s) you are applying for. Attach additional documentation as necessary.

Form with sections: Lot Area, Front Yard Setback, Rear Yard Setback, Frontage, Side Yard Setback, Exterior Side Yard Setback, Off-street Parking/Loading, Height, Accessory Structure 5-foot Setback, Other Variances, Signs. Includes a large text box for additional notes.

1. Assessor's **ADDRESS OF SUBJECT PROPERTY:** 19 Chequesset Street
 (List property subject to the application and include any lot numbers. Please note: The street number may be different than the Assessor's address).
2. Is this property known by any other address: No.
3. **OWNER OF RECORD:** Elvira DiLiddo +
 (The owner of record is the person or entity who owns title to the property as of today's date)
4. Address (es) of owner of record is /are 2A Pocono Road, Worcester, MA 01605
5. Worcester District Registry of Deeds (WDRD) Book(s) 66933, Page(s) 233
 (List Book and Page number of deed filed for the subject property as recorded at the WDRD)
6. City of Worcester Assessor's Office Map 46 Block 005 Lot 00239
 (List MBL number for the subject property as listed at Assessor's Office)
7. **NAME OF APPLICANT(S):** Elvira DiLiddo
8. Address of Applicant: 2A Pocono Road, Worcester, MA 01605
9. Telephone: (774) 578-3471
10. Email: N/A
11. Check if you are an: owner (s) lessee (s) optionee (s) (If you are not the owner of the subject property and are a lessee or optionee, it is recommended that you provide supporting information such as a lease or a purchase and sale agreement that shows your interest in the property.)
12. Zoning district(s) of the property (Indicate if more than one zoning district and any zoning overlay districts):
RL-7
13. Describe what is presently located on the property (Use as much detail as possible including all uses and square footage of each use):
Existing single family wood frame dwelling believed to have been constructed in 1930.
14. The applicant seeks to (Describe what you want to do on the property in as much detail as possible):
Subdivide property into two lots to allow for the construction of additional single family dwelling on a separate parcel on corner of Ansonia Road and Chequesset Road.
15. Such a use is permitted only by the City of Worcester Zoning Ordinance under Article (Insert Article, Section (s) of the Zoning Ordinance which permits the proposed used of the property):
Article II, Section 6 A. 3.

16. Are you aware if this property has been previously granted approvals from any City Board or Commission?

If so, please list (Provide dates of previous approvals, book and page numbers and/or certificate numbers of any recorded decisions and/or recorded/registered land. Also, please provide copies of previous recorded decisions):

Unknown.

17. Have you applied for or are you aware if other applicants have applied for a Building Permit for this site and been refused for non-compliance with the Zoning Ordinance (e.g. a cease and desist order has been issued)? If so, explain:

No.

18. List any additional information relevant to the Variance (s):

No off street parking exists for the premises as presently configured nor has the need for same been demonstrated given the adequate on street parking available to satisfy the parking required for the existing dwelling. Applicant proposes no change with respect the parking arrangement in place for the existing structure. New structure to include a two car garage.

VARIANCE FINDINGS OF FACT

Complete the following questions. Your responses should provide justifications as to why the requested Variance(s) should be granted. Attach additional documentation as necessary.

1. Describe how a literal enforcement of the provision of the City of Worcester Zoning Ordinance would involve a substantial hardship, financial or otherwise, to the petitioner or appellant:

A literal enforcement of the provisions of the Zoning Ordinance would require the Applicant to construct an attached addition to the existing structure in order to add an another dwelling unit which would impose a significant financial hardship upon the Applicant in that the existing structure would be difficult and expensive to add on to given its design characteristics and placement on the lot.

2. Describe how the hardship is owing to circumstances relating to the soil conditions, shape, and/or topography of the land or structures and how the hardship especially affects said land or structures, but does not affect generally the zoning district in which it is located:

The shape and topography of the lot favor the construction of two stand alone dwelling units on separate parcels as opposed to construction of or modification of a single structure containing two dwelling units. This situation is not generally found to exist on other similarly sized lots in RL-7 districts.

3. Describe how desirable relief may be granted without detriment to the public good and without nullifying or substantially derogating from the intent or purpose of the City of Worcester Zoning Ordinance:

The parcel as presently configured has more than adequate frontage and area to support a two family dwelling or two single family semi-detached units in one building in full compliance with the dimensional controls of the Zoning Ordinance. Applicant proposes the same number of total units as would be allowed by right if the buildings shared a common side wall so the use of the property for two single family dwelling on abutting lots does not increase the overall density allowed for the site in any manner and better utilizes the area available. No detriment to the public good nor derogation from the intent of the Zoning Ordinance is presented in this case.

4. Describe how the dimensional variance as it relates to floor space, bulk, number of occupants or other relevant measures, if granted, shall be no greater than the minimum necessary to provide relief from the statutory hardship:

The requested relief is the minimum required to allow for the subdivision of the land into two single family house lots supporting two single family dwellings. The Applicant has split the lot area deficiency, for which relief is required, as equally as possible after taking into account the placement of the existing and proposed structures thereon.

WHEREFORE, the applicant(s) requests that this Board grant the variance (s) as requested above.

By: *Elvira DiLiddo*
(Signature of Applicant or Applicant's Agent)
If more than one applicant, all applicants must fill out information.

Elvira DiLiddo
(Name of Applicant)

2A Pocono Road, Worcester, MA 01605
(Address)

(774) 578-3471
(Contact Phone Number)

c/o djo@oneilbarrister.com
(Email)

February 28, 2023
(Date)

By: *3/14/23*
(Signature of Property Owner or Owner's Agent)
If more than one property owner, all owners must fill out information.

Elvira DiLiddo
(Name of Property Owner)

2A Pocono Road, Worcester, MA 01605
(Address)

(774) 578-3471
(Contact Phone Number)

c/o djo@oneilbarrister.com
(Email)

February 28, 2023
(Date)

CERTIFICATION OF COMPLIANCE WITH WORCESTER REVISED ORDINANCES GOVERNING REVENUE COLLECTION

***Note: This form must be completed and signed by both the applicant(s) and owner(s) of the property certifying payment of all local taxes, fees, assessments, betterments, or any other municipal charges of any kind. Failure to include a fully completed certification form with the application shall result in the application being deemed incomplete and ineligible for further processing by the Zoning Board of Appeals.**

Pursuant to Massachusetts General Law, Chapter 40, Section 57 and the City of Worcester General Revised Ordinance, Chapter 11, Section 26-28, the undersigned applicant and all parties having an ownership interest therein, hereby certify, under the pains and penalties of perjury, that the applicant(s) and owner(s) have complied with the laws of the Commonwealth of Massachusetts and the City of Worcester regarding payment of all local taxes, fees, assessments, betterments or any other municipal charges of any kind.

(Give first and last names in full. In case of a corporation give names of President, Treasurer and Manager; and in case of firms, give names of individual members.)

(1) If a Proprietorship or Single Owner of residential property:

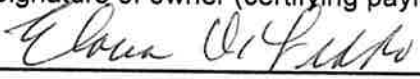
Name of Owner Elvira DiLiddo

Business Address N/A

Home Address 2A Pocono Road, Worcester, MA 01605

Business Phone N/A Home Phone (774) 578-3471

Signature of owner (certifying payment of all municipal charges):

 Date: 3/14/23

(2) If a Partnership or Multiple Owners of residential property:

Full names and address of all partners

Printed Names

Addresses

_____	_____
_____	_____
_____	_____

Business Address _____

Business Phone _____

Signature of all owners of property (certifying payment of all municipal charges -attach multiple pages if necessary)

_____	Date: _____
_____	Date: _____
_____	Date: _____
_____	Date: _____