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

<table>
<thead>
<tr>
<th>Lot Area</th>
<th>Front Yard Setback</th>
<th>Rear Yard Setback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Square footage required:</td>
<td>Setback required:</td>
<td>Setback required:</td>
</tr>
<tr>
<td>Square footage provided:</td>
<td>Setback provided:</td>
<td>Setback provided:</td>
</tr>
<tr>
<td>Relief requested:</td>
<td>Relief requested:</td>
<td>Relief requested:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Frontage</th>
<th>Side Yard Setback</th>
<th>Exterior Side Yard Setback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frontage required:</td>
<td>Setback required: 8'</td>
<td>Setback required:</td>
</tr>
<tr>
<td>Frontage provided:</td>
<td>Setback provided: 4.6'</td>
<td>Setback provided:</td>
</tr>
<tr>
<td>Relief requested:</td>
<td>Relief requested: 3.4'</td>
<td>Relief requested:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Off-street Parking/Loading</th>
<th>Height</th>
<th>Accessory Structure 5-foot Setback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parking required:</td>
<td>Height permitted:</td>
<td>Type of structure:</td>
</tr>
<tr>
<td>Parking provided:</td>
<td>Height provided:</td>
<td>Square footage of structure:</td>
</tr>
<tr>
<td>Relief requested:</td>
<td>Relief requested:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Loading required:</th>
<th>Other Variances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loading provided:</td>
<td>Relief requested:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Relief requested:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zoning Ordinance Article &amp; Section:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signs</th>
<th>Requirement:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Area permitted:</td>
<td>Provided:</td>
</tr>
<tr>
<td>Area provided:</td>
<td></td>
</tr>
<tr>
<td>Relief requested:</td>
<td></td>
</tr>
<tr>
<td>Height permitted:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Height provided:</th>
<th>Relief requested:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setback permitted:</td>
<td>Setback provided:</td>
</tr>
</tbody>
</table>

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.
TYPE OF SPECIAL PERMIT (check the Special Permit you are requesting and describe what you are requesting)

1. ☑ Extension, Alteration or Change of a Privileged Pre-existing, Nonconforming Structure and/ or Use (Article XVI, Section 4)

2. □ Residential Use allowed only by Special Permit (Article IV, Section 2, Table 4.1)

3. □ Non-Residential Use allowed only by Special Permit (Article IV, Section 2, Table 4.1)

4. □ Non-Accessory Sign (Article IV, Section 6)

5. □ Residential Conversion (Article IV, Section 9)

6. □ Placement of Fill/Earth Excavation (Article IV, Section 5)

7. □ Modification of Parking/Loading Requirements (Article IV, Section 7)

8. □ Modification of Landscaping Requirements for Parking/Loading (Article IV, Section 7)

9. □ Other Special Permit (Describe Special Permit sought).

1. Assessor's ADDRESS OF SUBJECT PROPERTY: 123 Hope Avenue

2. Is this property known by any other address: NO

3. OWNER OF RECORD: KEVIN & ANN MARIE GERMAINE

(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 SAME

5. Worcester District Registry of Deeds (WDRD) Book(s) 7465, Page(s) 312

(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 27, Block 001, Lot 00007

(MBL number for the subject property as listed at Assessor's Office)

7. NAME OF APPLICANT(S): KEVIN & ANN MARIE GERMAINE

8. Address of Applicant: 123 Hope Ave Worcester


10. Email: kgermain818@charter.net

11. Check if you are an: owner (✓), lessee (☐), optionee (☐) (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):

Article IV, Section 2, Table 4.1

Single family Detached Dwelling is allowed.
13. Describe what is presently located on the property (Use as much detail as possible including all uses and square footage of each use):

*Single family dwelling, 2 story. Built in 1911. Approx. 1552 sq. ft. of living space.*

14. The applicant seeks to (Describe what you want to do on the property in as much detail as possible):

*Close in existing deck in rear of house as a 3 season porch. of approx. 220 sq. ft.*

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 use of the property):

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):

*Not aware of any previous applied for, or approvals from any City board or Commission.*

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:

18. List any additional information relevant to the Variance (s) and Special Permit (s):
SPECIAL PERMIT FINDINGS OF FACT

In the spaces below explain how the adverse effects of the proposed use will not outweigh its beneficial impacts to the City with respect to each of the following considerations per Article II, Section 6(A)(2) of the Zoning Ordinance. (Attach additional supporting documentation as necessary.)

1. Social, economic or community needs that are served by the proposal:
   The structure will remain as a single family dwelling.
   Their would be no affect to the social, economic or
   community needs.

2. Traffic flow and safety, including access, parking and loading areas:
   There would be no affect to the traffic flow and safety,
   including access, parking and loading.

3. Adequacy of utilities and other public services:
   The added structure would not require any additional
   utilities or public services.

4. Neighborhood character and social structure:
   With the structure being in the rear of the house,
   there will be no affect on the neighborhood character
   and social structure.

5. Impacts on the natural environment:
   There is no impact on the natural environment.

6. Potential fiscal impact, including city services needed, tax base, and employment:
   The structure will not require additional city services,
   create no employment. The structure will increase the
   value of the property and likely increase the property
   tax paid yearly to the city.
WHEREFORE, the applicant(s) requests that this Board grant the special permit(s) as requested above.

By:  
(Signature of Applicant or Applicant’s Agent)  
If more than one applicant, all applicants must fill out information.  
Kevin L. Germain  
(Name of Applicant)  

(Address)  

(Contact Phone Number)  

(Email)  

(Date)  

By:  
(Signature of Property Owner or Owner’s Agent)  
If more than one property owner, all owners must fill out information.  
Kevin L. Germain Ann Marie Germain  
(Name of Property Owner)  

123 Hope Ave  
(Address)  

508-868-7822 508-868-7526  
(Contact Phone Number)  

Klgermain 818 charter.net  
(Email)  

Apr 7, 2022  
(Date)  

SUPPLEMENTARY QUESTIONS FOR SPECIAL PERMITS ONLY

Complete the requested information for the Special Permit requested. Attach additional documentation as necessary. Only complete the sections which pertain to the Special Permit(s) you are applying for.

---

**Extension, Alteration or Change of a Privileged Pre-existing, Nonconforming Structure**  
(Article XVI, Section 4)

1. Describe what is currently nonconforming about this structure (list specific dimensional nonconformities)

   The existing single family dwelling is too close to the side lot line. Closest point is 8.9 ft. from existing lot line.

2. Indicate how long the nonconforming aspects of the structure have been in existence:

   Since 1911, when house was constructed.

3. At the time of construction, did the structure meet applicable zoning requirements? (Check with the zoning ordinance, as amended, that would have been in effect at the time of construction. Past zoning ordinances are available for research at the City Clerk’s office. Past zoning maps are available at the Division of Planning and Regulatory Services)

   N/A

4. Describe the proposed extension, alteration or change and the total square footage of any physical expansion:

   Deck was existing, had it enclosed by a contractor who did not pull proper permits. 14' x 16', 224.5 sq ft.
5. Explain how the extension, alteration, or change itself complies with the current Ordinance requirements:

The property remains a single family dwelling.

6. Indicate the number of off-street parking spaces currently provided and to be provided for the proposed structure as extended, altered or changed: Note: In residential districts, the structure as extended, altered or changed shall meet the off-street parking requirements of the zoning ordinance.

There is no change in parking.

7. Explain how the structure as extended, altered or changed will not be substantially more detrimental to the neighborhood than the existing structure:

The enclosure of the deck does not directly impact any of our abutters.

---

**Extension, Alteration or Change of a Privileged Pre-existing, Nonconforming Use**  
(Article XVI, Section 4)

1. Describe what is currently nonconforming about this use:

2. Indicate how long the nonconforming use has been in existence? What year did the use begin? (Check with the zoning ordinance, as amended, that would have been in effect at the time of construction. Past zoning ordinances are available for research at the City Clerk's office. Past zoning maps are available at the Division of Planning and Regulatory Services)

3. At the time the use was initiated, was the use allowed under the then applicable Zoning Ordinance?

4. Describe the proposed extension, alteration or change of use and the total square footage to be utilized for the use:

5. Explain how the extension, alteration, or change itself complies with the current Ordinance requirements:

6. Indicate the number of off-street parking spaces currently provided and to be provided for the proposed structure as extended, altered or changed: Note: In residential districts, the use as extended, altered or changed shall meet the off-street parking requirements of the zoning ordinance.

7. Explain how the use as extended, altered or changed will not be substantially more detrimental to the neighborhood than the existing use:
Residential Use allowed only by Special Permit in a particular zoning district
(Article IV, Section 2, Table 4.1)

1. Describe the proposed residential use:

2. Total number of dwelling units proposed, number of bedrooms per unit, and square footage of units:

3. Number and dimensions of off-street parking spaces to be provided and location (garage, driveway). Off-street parking spaces must be located outside of the front yard and exterior side yard setbacks.

Non-Residential Use allowed only by Special Permit
(Article IV, Section 2, Table 4.1)

1. Describe the proposed use (include description of business, proposed hours of operation, and number of employees)

2. Total square footage of proposed use:

3. Number of off-street parking spaces to be provided. Indicate location of those parking spaces; garage, parking lot, parking spaces on a different lot provided through the same ownership and/or leased spaces (a 5-year minimum lease with renewal options must be provided) within 1,000 feet of the use it will serve.

4. For a proposed animal hospital, animal clinic, pet shop or animal shelter, per Article IV, Section 2, Notes to Table 4.1, Note 4, indicate the location of any animal runs if a residential zoning district is within 200 feet of the subject property.

5. For a proposed Bed and Breakfast use, provide additional documentation per Article IV, Section 11.

8. For a proposed Adult Entertainment use, provide additional documentation per Article IV, Section 10.

9. For a proposed Limited Residential Hospice House, provide additional documentation per Article IV, Section 2, Notes to Table 4.1, Note 10.
10. For a proposed non-accessory parking lot or a motor vehicle display lot, provide additional documentation showing compliance with Article IV, Section 7B.

Non-Accessory Sign
(Article IV, Section 6)

1. Square footage, length and width of proposed sign, and height of total structure:

2. Distance of proposed sign from other non-accessory signs along each side of a street.

3. Indicate on the submitted plan the type and style of sign, exact location, etc.

Residential Conversion
(Article IV, Section 9)

1. Total number of existing units/Total number of proposed units:

2. Will the external appearance of the structure remain unchanged except for new doors, windows, fire escapes, and stairways?

3. Number of off-street parking spaces to be provided (If new parking is being created, the applicant(s) may need to seek a Special Permit for extension, alteration or change of a pre-existing, nonconforming structure if existing structure does not meet current zoning dimensional requirements. If additional parking cannot be provided for new dwelling unit(s), the proposed conversion may also require a Variance or Special Permit from off-street parking requirements):

4. Which dimensional requirements/setbacks are you seeking relief by the Special Permit?
Placement of Fill/Earth Excavation
(Article IV, Section 5)

1. Indicate whether the Special Permit is for Placement of Fill or Earth Excavation:

2. Attach documentation showing proposed measures to protect pedestrians and vehicles.

3. Provide a proposed timeline for completion of placement of fill.

4. Attach documentation from the Director of Public Health and the Conservation Commission as outlined in the City of Worcester Zoning Ordinance Article IV, Section 5.

5. Attach a site plan with all required information in support of the application per the City of Worcester Zoning Ordinance Article IV, Section 5.

Modification of Parking/Loading Requirements
(Article IV, Section 7)

1. Indicate what relief is being sought under the Special Permit:

2. If applicable, indicate locations, square footages, and dimensions of relief sought under the Special Permit:

2. If applicable, provide number of parking/loading spaces required and relief requested through the Special Permit:

Other Special Permits

1. Describe Special Permit sought and provide relevant details on the plan of land and rendering. Provide square footage and height of any structures and indicate percentage of lot structure will occupy:
(3) If a Corporation:

<table>
<thead>
<tr>
<th>Full Legal Name</th>
<th>State of Incorporation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Principal Places of Business</th>
<th>Place of Business in Massachusetts</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Printed Names of Officers of Corporation:

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Owners of Corporation:

<table>
<thead>
<tr>
<th>Printed Names</th>
<th>Address</th>
<th>% of stock</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

(4) If a Trust:

Name of Trust

<table>
<thead>
<tr>
<th>Business Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Printed Names of Trustees:

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Printed Names of Beneficiaries:

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

(5) Signature of Applicant (if different from owner, certifying payment of all municipal charges):

Printed Name of Applicant:

<table>
<thead>
<tr>
<th>Signature of Applicant:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. Assessor's ADDRESS OF SUBJECT PROPERTY: 123 Hope Ave, Worcester, MA
   (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: Kevin L. & Ann Marie Germain
   (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 123 Hope Ave

5. Worcester District Registry of Deeds (WDRD) Book(s) 7465, Page(s) 312
   (List Book and Page number of deed filed for the subject property as recorded in the WDRD)

6. City of Worcester Assessor’s Office Map 27 Block 001 Lot 00007
   (List MBL number for the subject property as listed at Assessor’s Office)

7. NAME OF APPLICANT(S): Kevin L. & Ann Marie Germain

8. Address of Applicant: 123 Hope Ave Worcester, MA


10. Email: klygermain818@charter.net

11. Check if you are an: owner (☐) lessee (☐) optionee (☐) 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):
    RS-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):
    Located on the subject property is a single family house with a deck.

14. The applicant seeks to (Describe what you want to do on the property in as much detail as possible):
    The applicant seeks releif from the side yard requirement for an existing addition to the home. The addition is not closer to the property line than the original structure. This lot pre-existed the current zoning bylaws.

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 use of the property):
    Article IV, Section 2, Table 4.1
    Single family Detached Dwelling is allowed
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): I am not aware of any.

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: I am not aware of any.

18. List any additional information relevant to the Variance(s): Unfortunately, the contractor I hired to perform the work lied to the City to get a permit using someone else's license #.

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:

At this point, a literal enforcement would cause us to remove a portion of the addition at a considerable cost to us. Both Ann Marie are retired and now on Social Security and it would truly cause a financial hardship.

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 addition as it sits now is less non-conforming than the original house that pre-dates the zoning requirements.
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:

Relief granted here would make no changes to the existing conditions on this site.

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:

there is no floor space restriction in RS-7.

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

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

Kevin L. Germain  
(Name of Applicant)  
123 Hope Ave.  
(Address)  
508-868-7822  
(Contact Phone Number)  
Klgermain818@charter.net  
(Email)  
November 30, 2021  
(Date)

By: Kevin L. Germain  
(Signature of Property Owner or Owner's Agent)  
If more than one property owner, all owners must fill out information.  

Kevin L. Germain  
(Name of Property Owner)  
123 Hope Ave.  
(Address)  
508-868-7822  
(Contact Phone Number)  
Klgermain818@charter.net  
(Email)  
November 30, 2021  
(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 ________________________________

Business Address ________________________________

Home Address ________________________________

Business Phone __________________ Home Phone __________________

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

__________________________ Date: __________

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

Full names and address of all partners

Printed Names  ________________________________  Addresses  ________________________________

Kevin L. Germain  123 Hope Ave. Worcester, MA

Ann Marie Germain  123 Hope Ave. Worcester, MA

Business Address _____________________________

Business Phone ________________________________

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

__________________________ Date: __________________

__________________________ Date: __________________

__________________________ Date: __________________
(3) If a Corporation:

Full Legal Name
State of Incorporation
Principal Places of Business
Place of Business in Massachusetts
Printed Names of Officers of Corporation:

________________________________________
________________________________________
________________________________________

Title

Owners of Corporation:
Printed Names

________________________________________
________________________________________
________________________________________

Address % of stock

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

Date:
Date:
Date:
Date:

(4) If a Trust:

Name of Trust
Business Address
Printed Names of Trustees:

________________________________________
________________________________________
________________________________________

Address

Printed Names of Beneficiaries:

________________________________________
________________________________________
________________________________________

Address

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

Date:
Date:
Date:
Date:

(5) Signature of Applicant (if different from owner, certifying payment of all municipal charges):

Printed Name of Applicant:

Signature of Applicant: ___________________________ Date: ________