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:</td>
<td>Setback required:</td>
</tr>
<tr>
<td>Frontage 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>Off-street Parking/Loading</th>
<th>Accessory Structure 5-foot Setback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parking required:</td>
<td>Height permitted:</td>
</tr>
<tr>
<td>Parking provided:</td>
<td>Height provided:</td>
</tr>
<tr>
<td>Relief requested:</td>
<td>Relief requested:</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>
<tr>
<td>Relief requested:</td>
<td>Zoning Ordinance Article &amp; Section:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Signs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requirement:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Area permitted:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provided:</td>
</tr>
<tr>
<td>Area provided:</td>
</tr>
<tr>
<td>Relief requested:</td>
</tr>
<tr>
<td>Height permitted:</td>
</tr>
<tr>
<td>Height 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.
1. Assessor's ADDRESS OF SUBJECT PROPERTY: 50 South Flagg St.
   (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: N/A

3. OWNER OF RECORD: Jessica LaFrance
   (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 50 South Flagg St.

5. Worcester District Registry of Deeds (WDRD) Book(s) 53999, Page(s) 26
   (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 Block 002 Lot 19 + 20
   (List MBL number for the subject property as listed at Assessor's Office)

7. NAME OF APPLICANT(S): Harry Richardson / Jessica LaFrance

8. Address of Applicant: 50 South Flagg St. Wore, 01602


10. Email: Harry.Richardson@OBP.com / LaFrance7@hotmail.com

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):

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 house with attached garage
and a tree house in the back yard

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

Seeks variance relief, height limitations
For recently constructed tree house

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 8, Line 10
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

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):

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:

   Would incur financial hardship per cost of demo/removal, and hardship of use in that no other tree is suitable for a tree house if available within height requirements.

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:

   Circumstances of topography, lot, shape, and site, tree configuration, unique to the property, recluse ability to meet height requirements for sitting the tree house, unique to this lot, while other abutters property generally in the district are able to do so.
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 will not be detrimental to the public good as the tree house is very far away from any abutters and will not create a nuisance.

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:

Dimensional variance not needed. Height variance is being sought.

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

By: ____________________________
(Signature of Applicant or Applicant’s Agent)
(Name of Applicant)

Address:
50 South Flagg St
(Email)

If more than one applicant, all applicants must fill out information.

By: ____________________________
(Signature of Property Owner or Owner’s Agent)
(Name of Property Owner)

Address:
50 South Flagg St
(Email)

If more than one property owner, all owners must fill out information.

Contact Phone Number:
774-979-0769
508-607-3340

(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  Jessica LaFrance

Business Address

Home Address  50 South Flaee st. Worcester Ma 01602

Business Phone  Home Phone  508-774-272-0764

Signature of owner (certifying payment of all municipal charges):  Jessica LaFrance  Date:  5-3-12

(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:
(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: