

PLANNING AND ZONING COMMISSION

TOWN OF UNION, CONNECTICUT

Mail Address: 1043 Buckley Highway, Union, CT 06076

APPLICATION FOR ZONING PERMIT

SECTION 5.02

Please submit 2 copies of this application and accompanying plot plan.

Part 1: Basic Application Requirements

NAME OF OWNER _____ TEL. NO. _____

ADDRESS _____

NAME OF APPLICANT _____ TEL. NO. _____

ADDRESS _____

ADDRESS OF PROPERTY FOR WHICH ZONING PERMIT IS REQUESTED. GIVE NEAREST UTILITY POLE NUMBER, STREET INTERSECTION, MAP/BLOCK/LOT NUMBER OR OTHER LANDMARKS.

ZONE CLASSIFICATION IN WHICH THE PROPOSED PROJECT IS TO BE LOCATED:

Rural Residential____, Country Residential____, Retail Trade____, Commercial____, Industrial____,
Other_____ (Specify)

THIS APPLICATION IS FOR A: Single Family Dwelling____, Multiple Family Dwelling____,

Garage____, Barn____, Shed____, Commercial/Industrial____, Other_____ (Specify)

Alteration/Addition to a _____

Size of proposed structure _____ X _____ Square Feet _____

Proposed use _____

Other _____

1. Are there any wetlands or watercourses located within the boundaries of the property ? _____
2. Has an application been filed with the Wetlands Agency ? _____ N/A _____
3. Is the property located within 500 feet of an adjoining town line? _____
4. Has a driveway permit been applied for? Union town road _____ State road _____ N/A _____
5. Has driveway permit been approved? _____
6. Has the sanitarian approved this site as suitable for the proposed project? _____ N/A _____
7. Has the lot been staked showing the location of the proposed project? _____

For Commission use only:

Date submitted: _____

Date next regular meeting: _____

Date officially recieved: _____

Disposition: _____

APPLICATION FOR ZONING PERMIT
SECTION 5.02

A site plan scaled at one inch equal to no more than forty feet must be submitted showing the following:

1. The actual shape and dimensions of the lot to be used. If the lot is substantially larger than the area to be developed, an inset map of an increased scale must be provided showing the location of the proposed project within the lot.
2. The location of any Town or State street, road or highway which passes through or adjoins the lot. If no such street, road or highway exists the entire route of vehicular access to the lot must be shown.
3. The size and location of any existing buildings, structures, parking and/or loading areas on the lot.
4. The names of all owners of record of any land abutting the lot to which the zoning permit would apply.
5. The direction of true North.
6. The location of any setback or yard lines.
7. A computation of lot coverage.
8. The location of the required "critical area" as required in section 2.08.02 of the Zoning regulations and a statement from the town Sanitarian indicating that the "critical area" is suitable for the installation of a subsurface sewage system that will meet the minimum standards set by the state and town.
9. The location of any existing or proposed wells and sewage disposal facilities (including principal and reserve leaching areas) showing the precise minimum distances among the wells, sewage disposal facilities, buildings, structures, driveways, parking areas, wetlands and property lines.
10. The location of existing and/or proposed driveways. (A driveway permit is required before any driveway may be constructed or altered.)
11. Location of any areas subject to 100-year flooding.
12. Location of all watercourses and wetlands on the lot.

Part II: Additional Application Requirements

The Commission may, within 35 days after the official date of receipt of this application, require additional information to determine whether the proposed building, structure or use conforms to the Zoning regulations.

WE, THE PROPERTY OWNERS AND APPLICANTS, HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AS PROVIDED UNDER PENALTY OF THE CONNECTICUT STATE STATUTES AND HEREBY GRANT PERMISSION FOR MEMBERS OF THE ZONING COMMISSION OR THEIR DULY AUTHORIZED AGENTS TO ENTER THE PROPERTY FOR THE NECESSARY INSPECTIONS TO DETERMINE CONFORMITY WITH THE UNION ZONING REGULATIONS AND ALL APPLICABLE STATE PUBLIC ACTS.

Property owner _____ Date _____

Property owner _____ Date _____

Applicant _____ Date _____

Applicant _____ Date _____