

ZONING PERMIT or SPECIAL USE PERMIT APPLICATION

TOWN OF UNION ♦ Planning and Zoning Application #



1043 Buckley Highway, Union, CT 06076

Application Type: [CHECK ONE OR MORE OF THE FOLLOWING]

Zoning Permit Modification of Approved Site Plan

Special Use Permit:

(EXPLAIN) _____

Complete all of the following information on the subject property:

- Property Address/location of proposed activity: (#/street) _____
- Assessor's Map No. _____ ⇨ Block No. _____ ⇨ Lot No. _____
- Zone District: Rural Res. ___ Commercial/Industrial ___ Retail Trade ___ Special Development ___
- Total Parcel Area (acres) _____
- Has a driveway permit been applied for? _____
- Are there any wetlands or watercourses within the boundaries of the property? _____
- Has N.E.D.H.D. approved this site as suitable? (Attached approval letter) _____
- Is the property within 500' of an adjoining municipality? **Yes** **No**

Project Name & Description/Narrative

Note: In accordance with Connecticut General Statutes, Section 8-7c, applicant shall provide disclosure of all names of individuals affiliated with Trusts, LLPs and LLCs.

***Applicant Name:** _____ Phone () _____

Address: (mailing) _____



***Owner Name:** (if not applicant) _____ Phone () _____

Owner Address: (mailing) _____

***This application is not valid unless owner signs on back of this form.**

All applications for Zoning Permit, Site Plan Modification, and Special Use Permits must comply with all applicable Zoning Regulations.

WAIVERS OF SPECIFIC REQUIREMENTS

It is not the Union Planning and Zoning Commissions preference to waive any of the specific requirements of the Zoning Regulations. The information requested in the Zoning Regulations shall be provided by the applicant unless it is determined unanimously by the Commission that such a waiver or modification will not impair the Commission’s ability to determine the applicant’s conformance with the regulations

When appropriate to the situation, the Commission may grant a waiver to one or more of the requirements of the Zoning Regulations only when a written request for such waiver(s) is presented to the Commission with the application. The detail as to the circumstances surrounding the request for waiver(s), the necessity, and what alternatives were reviewed must be presented to the Commission before any such determination can be made.

ADDITIONAL REQUIREMENTS:

The Union Planning and Zoning 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.

The undersigned hereby permits town staff and commission members to enter onto and inspect this site during reasonable hours for the purpose of reviewing this application and accompanying plans. I hereby depose and say that all of the above statements as well as the statement and representations contained in all supporting documents herewith are true.

APPLICANT'S SIGNATURE **DATE** _____
OWNER'S SIGNATURE (IF NOT APPLICANT) **DATE**

FOR OFFICE USE ONLY

This application was received on: **Date** _____

Fee Paid: \$ _____ **Check #** _____