

Town of East Haven
APPLICATION FOR ZONING PERMIT
(REV. 8/5/2021)

The applicant is responsible for accurately completing all sections of this Application. Assessor Cards and Plot Plans are considered to be part of this application, and any error or omission on the application and/or plan may automatically void any approvals.

Application # _____

Date Submitted _____

Project Address: _____

Assessor's Map # _____ Block # _____ Lot # _____ Zoning District _____

Property Owner(s) _____

Mailing Address _____ Telephone _____

Applicant: _____

Mailing Address _____ **Telephone** _____

****Complete description of proposed use or project (include dimensions, if applicable):** _____

Existing Property Use _____

Does the property have a private well and/or septic system? _____

Are wetlands and/or watercourses present anywhere on the property? _____

ZBA Approval Date _____ Wetlands Permit Approval Date _____

Special Exception/Site Plan Approval Date _____ CAM Approval Date _____

The undersigned applicant, property owner and/or agent acknowledges hereby acknowledges that it is not the obligation of the Zoning office to seek out and insert any information required in this Application. By signing this application, the applicant(s) and/or owner(s) agree that the Zoning Official and the Planning and Zoning Commission, or their agent(s), are authorized to enter upon the property for which this permit applies for the purpose of inspection and enforcement and administration of the Zoning Regulations for the Town of East Haven. This permit is issued based upon the plot plan and all supporting documents submitted. Falsification by misrepresentation or omission or failure to comply with the conditions of this permit shall constitute a violation of the East Haven Zoning Regulations and shall render this permit void. The undersigned further acknowledges that any construction, grading, filling or use of land, authorized by this Permit that results in any form of PHYSICAL DAMAGE to any Town Property, Town Road, existing or bonded Subdivision and/or Re-subdivision is the sole responsibility of the property owner for whom this permit is being issued; and that the Town is duly authorized to withhold any Permit and/or Certificate of Use and Occupancy approved under this permit until such time that all said damage is repaired and/or replaced to the satisfaction of the Town of East Haven.

This permit is void if: Work activity being performed is not in accordance with this permit.

A site plan is attached clearly showing:

- a) The location and exact dimensions of all boundaries of the lot;
- b) The location of wetlands and/or watercourses (including but not limited to, streams, ponds or lakes) on, or near the property;
- c) The location and exact dimensions of all existing and proposed structures and other improvements.
- d) The exact distance of proposed structures and improvements from lot lines;
- e) Name and location of each street abutting the lot, and/or the location and width of any other way affording access to the lot from a street;
- f) A floor plan if application is for a commercial change of use, or new tenant if not a change of use.

The following must also be furnished as part of the application:

- g) **Fee: Permit \$30.00.** Make one check made payable to the Town of East Haven.
- h) **Required Bonds if applicable:**

Planning and Zoning Commission per Zoning Regulation Sections 27.10, 28.36, 30A.13, 31.4.5, 33.7 and/or 33.15.

I / We certify that all the information on this application, including that on the site plan and any attachments, is correct as of the date below and complete. I/We certify that I/we am/are the owner(s) of the premises described above, or the authorized agent of the owner(s) of said premises.

Dated:

Owner, Applicant or Agent Signature

FOR OFFICIAL USE ONLY:

Date received by ZEO _____

Fee: Town - \$30 Check/M.O. # _____ Date _____

Signature of Zoning Enforcement Officer _____

Approval Date _____ Denied (date) _____ Sec. _____

Permit Conditions/Reasons:

Project Location: _____

ENGINEERING STAFF USE ONLY

Flood Plain Information: _____ Zone: _____

Existing Elevation: _____

Proposed Elevation: _____

Required Elevation: _____

Inland Wetlands on property? ☐ YES ☐ NO

Tidal Wetlands on property? ☐ YES ☐ NO

Inland Wetland Approval required: ☐ YES ☐ NO

Flood & Erosion Approval required ☐ YES ☐ NO

C. A. M. Approval required? ☐ YES ☐ NO

Conditions and/or Buffer Strip Required _____

Signature of Town Engineer, or authorized agent: _____

Preliminary Approval & Date	DEPARTMENT	Final Approval & Date
	ENGINEERING	
	INLAND WETLANDS	
	FLOOD & EROSION	
	COASTAL MGT	
	TAX OFFICE	
	FIRE MARSHALL	
	EAST SHORE HEALTH	
	ZONING	