TOWN of EAST HAVEN
APPLICATION for ZONE and/or TEXT CHANGE

DATE RECEIVED __________________ Fees Submitted __________________

TYPE OF APPLICATION BEING SUBMITTED:

[A] Zone Change                                   [ ]
[B] Text Change                       New - [ ] Modified - [ ]
[C] Planned Development District         [ ]
[D] Office Campus District                    [ ]
[E] Planned Elderly Facilities District    [ ]

The undersigned applicant hereby petitions the East Haven Planning and Zoning
Commission to hold the required Public Hearings and to consider the following ZONE
Change [ ] TEXT Change [ ] If the petition is for a TEXT change attach the
proposed TEXT change to this application. If the petition is for a ZONE change; it is to
change the Existing ________________ Zone to a proposed ___________ Zoning
district on the following parcels of land
_____________________________________________________________________
_____________________________________________________________________

[1] Applicant's name: ___________________________________________________

[2] Applicant's address: __________________________________________________


[4] Subject parcel(s)
   map# ____________ block # ____________ parcel # ____________
   map# ____________ block # ____________ parcel # ____________
   map# ____________ block # ____________ parcel # ____________

   Proposed Zoning District: ________ Minimum Lot Size in Proposed Zone ______

   Size of Parcel being petitioned for a zone change {include Assessor's card[s] for
   all parcels included in the proposed change).

   Is Assessor's [field] Card attached to this petition?    Yes [ ] No [ ]

[6] The proposed USE of the subject parcel is: _____________________________
   _____________________________ in accordance with

Section: ______________________ of the East Haven Zoning Regulations.
TOWN of EAST HAVEN
APPLICATION for ZONE and/or TEXT CHANGE

[7] How will the proposed Zone Change and/or Text Change relate to the Town of East Haven's Plan of Development? ________________________________________
______________________________________________________________________
______________________________________________________________________

[8] The applicant believes that this Zone Change and/or Text Change will be beneficial to the Town of East Haven for the following reasons: ________________________
______________________________________________________________________
______________________________________________________________________

[9] The following questions must be answered completely. The Applicant is responsible for adherence to the appropriate State and/or Federal Agencies (unless otherwise indicated)

[9a] Is the proposed Zone and or Text Change affecting land, or it's use within 500 feet of a Town line [C.G.S. 8-3b] ? Yes [ ] No [ ]
{Town makes notification to the Municipality and to the Regional Planning Agency}

[9b] Is the proposed Zone Change affecting land or it's use within 500 feet of a Town Line...or...will it have a significant impact on another Municipality [traffic, drainage etc.] [C.G.S. 8-3h] Yes [ ] No [ ] {Town makes notification}

[9c] Will the proposed Zone and/or Text Change result in a subdivision within 500 feet of a Town Line? [C.G.S. 8-26b] Yes [ ] No [ ] {Town makes notification}

[9d] Will the proposed Zone and/or Text Change result in a subdivision within 500 feet of a Town Line...or...will it have a significant impact on another Municipality? [traffic, drainage, etc.] [C.G.S. 8-26f] Yes [ ] No [ ] {Town makes notification}

[9e] Will the proposed Zone and/or Text Change have any type of effect on anything within the COASTAL AREA BOUNDARY [C.G.S. 22a-104e] If so. contact the TOWN ENGINEER for a CA.M. [Coastal Area Management] Report.

[9f] Will the proposed Zone and/or Text Change result in a Site Plan requiring a Coastal Site Plan Review [C.G.S. 22A-105]; if so, contact the TOWN ENGINEER.

[9g] Will the proposed Zone and/or Text Change result in the creation of any SHORELINE FLOOD and EROSION CONTROL STRUCTURES [C.G.S. 22a-109d], if so, contact the TOWN ENGINEER.

[9h] Will the proposed Zone and/or Text Change affect an area of INLAND WETLANDS and/or WATERCOURSE; if so, contact the TOWN ENGINEER.
TOWN of EAST HAVEN
APPLICATION for ZONE and/or TEXT CHANGE

[10] Is this Zone and/or Text Change accompanied by a SUBDIVISION Plan?
Yes [ ] No [ ]

[11] Is this Zone and/or Text Change accompanied by a SITE PLAN?
Yes [ ] No [ ]

I attest that the information contained in this APPLICATION for a ZONE and/or TEXT CHANGE are true to the best of my knowledge

Applicant's Signature: _______________________________ Date: _______________

- 3 -