

TOLLAND PLANNING AND ZONING COMMISSION

SITE PLAN APPLICATION FORM

THIS FORM MUST BE COMPLETELY FILLED OUT

APPLICANT _____ TEL # _____

MAILING ADDRESS _____

CONTACT EMAIL ADDRESS _____

OWNER OF RECORD _____ TEL # _____

MAILING ADDRESS _____

LOCATION OF SUBJECT PROPERTY:

STREET # _____ Located on the _____ side of _____, _____ feet from the

Intersection of _____ and _____

Assessor's Map _____ Block _____ Lot _____

As described in the Town Clerks records VOL. _____, PAGE _____

I HEREBY APPLY FOR A SITE PLAN FOR: _____

Have any previous applications been filed in connection with these premises? _____ yes _____ no

If yes, describe briefly _____

Former P&Z App. # _____ Date of Previous Action(s) _____

All the above statements and the statements contained in any documents and plans submitted herewith are true, to the best of my knowledge.

Signature of Owner(s) of Record

(Certifies authorization for petition and permission to enter the property in connection with the application)

Signature of Applicant(s)

THIS APPLICATION MUST BE ACCOMPANIED WITH THE FOLLOWING:

1. Seven (7) copies and a PDF of the proposal with all the information required by the Zoning Regulations. (E-mail PDF to hsamokar@tolland.org)
2. An application fee in the amount of \$ _____

DATE OF SUBMISSION (fee and application) _____ FEE RECEIVED \$ _____

DATE OF OFFICIAL RECEIPT _____ P&Z APP. # _____