



SITE PLAN/SPECIAL PERMIT APPLICATION

Town of New Milford Zoning Commission

Rev. 10/29/13

FOR OFFICE USE ONLY

SPECIAL PERMIT #: _____

DATE SUBMITTED: _____

FEE PAID:\$ _____ CK #: _____

TYPE OF APPLICATION

SPECIAL PERMIT & SITE PLAN *₁ (see pg. 4)

SITE PLAN

SITE PLAN MODIFICATION

1. PROPERTY LOCATION:

Site address: _____
(As listed in the Tax Assessor's records)

Assessor's Map #: _____ Assessor's Lot #: _____

Zone: _____ Lot area: _____ acres/ _____ sq ft

Is property within 500 feet of an adjoining town YES NO

Is property within the Aquifer Protection Area or a watershed area? YES*₂ NO (if YES, see pg. 4)

Is the property, or any portion thereof, within a 100 year floodplain? YES NO

Does the property contain wetlands or watercourses? YES NO

Has the application been submitted to the Inland Wetlands office? YES NO

Is the property served by public sewer? YES NO

Is the property served by a water company? YES NO

2. PRIMARY CONTACT: Applicant Property Owner Authorized Agent

3. APPLICANT:

Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Email: _____

4. PROPERTY OWNER:

Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Email: _____

5. AUTHORIZED AGENT:

Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Phone: _____ Email: _____

6. BRIEF DESCRIPTION OF PROJECT/PROPOSED USES(S): _____

7. CURRENT USE(S): _____

8. FOR SPECIAL PERMITS, LIST THE SPECIAL PERMIT USES(S) AND SECTION(S) OF THE ZONING REGULATIONS THAT REQUIRES A SPECIAL PERMIT FOR THE USE(S): _____

9. ATTACHMENTS:

In addition to this completed application form and required fees, as set forth in Appendix B of the New Milford Zoning Regulations, **one (1) copy** of each of the following must be submitted:

- Written statement signed by the applicant detailing the proposed use
- Name(s) and address(s) of owners of record, as of the date of application submission, of all abutting property owners and those directly across the street from the subject property (*obtain from the Tax Assessor's office*)
- Property Field Card (*obtain from the Tax Assessor's office*)
- Tax map showing the location of the property (*obtain from the Tax Assessor's office*)
- Schedule A – Legal Description of the property (*obtain from the Town Clerk's office*)
- Agent Letter of Authorization signed by the owner of record. Owner of record's original signature required. Faxed or scanned copies will not be accepted. (*if applicable*)

Unless waived by the Zoning Commission (see **Waiver Request**, pg. 3) nine (9) copies ◇ (see below) of the following supporting documents must be submitted in accordance with section 175-020(3) of the New Milford Zoning Regulations:

- Property Survey (Class A-2)
- Existing Conditions Map (Site Features, Existing)
- Proposed Site Improvements Map
- Building Floor Plans and Renderings
- Off-Street Parking and Loading Plan
- Stormwater Management Plan
- Lighting Plan
- Landscaping Plan
- Traffic Report
- Soil Erosion and Sediment Control Plan

◇ *The Zoning Enforcement Officer may allow fewer copies and reserves the right to request additional copies pursuant to section 175-030(5). **Please consult with Zoning staff prior to submitting copies.***

All plan sets shall be folded. Rolled plans will not be accepted. A transmittal form or cover letter listing all submitted documents should be provided.

For an **Accessory Apartment** application please see staff for additional requirements

10. SIGNATURES (MUST BE ORIGINAL INK, NOT SCANNED OR FAXED):

The undersigned declares that the information contained herein and all accompanying documentation is to the best of his/her knowledge and belief true and accurate. The applicant understands that this application is considered complete only when all information and documents required have been submitted and the fee paid. The applicant or their agent must be present for the meeting at which their application will be heard.

APPLICANT:

SIGNATURE: _____ DATE: _____

PRINTED NAME: _____

OWNER OF RECORD (IF DIFFERENT FROM APPLICANT)

SIGNATURE: _____ DATE: _____

PRINTED NAME: _____

11. WAIVER REQUEST:

The Commission, upon written request by the applicant may, by resolution, waive the required submission of part of the information specified under subsection 175-020(3), if the Commission finds that the information is not necessary to determine compliance with the regulations and render a decision on the site plan application.

I request that the Zoning Commission waive the required submission of the following items specified under subsection 175-020(3) and section 180-030(3) (if applicable):

- _____ Property Survey (Class A-2) §175-020(3)(a)
- _____ Existing Site Conditions Map §175-020(3)(d)
- _____ Proposed Site Improvements Map (Engineered Site Plan) §175-020(3)(e)
- _____ Building Floor Plans and Renderings §175-020(3)(f)
- _____ Off-Street Parking and Loading Plan §175-020(3)(g)
- _____ Stormwater Management Plan §175-020(3)(h)
- _____ Lighting Plan §175-020(3)(i)
- _____ Landscape Plan §175-020(3)(j)
- _____ Traffic Impact Report §175-020(3)(k)
- _____ Soil Erosion and Sediment Control Plan §175-020(3)(l)

APPLICANT SIGNATURE: _____ DATE: _____

SCHEDULE OF FEES

Additional Zoning permit fees apply – see Appendix B(a)

Site Plan <i>or</i> Site	\$100.00 – up to \$100,000 cost of construction	\$ _____
Plan Modification	\$100.00 for each additional \$100,000 of construction	\$ _____
Special Permit	\$250.00 (per Special Permit request)	\$ _____
	\$ 60.00 State of CT Land Use Fee (INCLUDE W/ALL SPECIAL PERMITS)	\$ _____

Checks are made payable to the Town of New Milford **Total fee submitted** \$ _____

Pursuant to section 8-3d of CTGS, a Special Permit is not in effect until filed on the land record. If the application is approved, a fee (to be determined by staff) will be required to cover the filing.

The Fees set forth are the minimum fees required. The New Milford Zoning Commission reserves the right to hire, at the applicant’s expense, outside consultants of the Commission’s choice in its sole discretion, including, but not limited to attorneys and engineers, to assist in the review of any application submitted to the Zoning Commission (See Appendix B of the New Milford Zoning Regulations).

***₁ Public Hearing Requirements**

Any application involving a public hearing requires the applicant to send notice, via certified mail return receipt requested, to all owners of record of any abutting properties and those properties across the street, at least fifteen (15) days prior to the date of the public hearing. The property shall also be placarded with a sign visible to the public indicating the date, time and place of the public hearing at least fifteen (15) days prior to the hearing (*See section 180-060 – Public Hearing Notice Requirements – of the New Milford Zoning Regulations*).

***₂ Notification to the Local Water Company**

In accordance with P.A. 06-53 any application to the Zoning Commission for a project located within an aquifer protection area or the watershed of a water company requires the applicant to notify the Commissioner of the CTDPH and the local water company no later than seven (7) days after the date of application via certified mail, return receipt requested. The aquifer protection area map is available in the Zoning office or online at www.newmilford.org. Public Water Supply ID for Aquarion Water Company is #CT0960011/C.

Attention: Brian Roach	www.ct.gov.dph Go to Drinking Water section/forms/
Supervisor, Environmental Protection	“Watershed or Aquifer Area Project Notification Form”
Aquarion Water Company	OR CT Department of Public Health
714 Black Rock Road	410 Capital Avenue MS#51WAT
Easton, CT 06612	P.O. Box 340308
	Hartford, CT 06134

Please refer to the New Milford Zoning Regulations, which can be found online at www.newmilford.org or in the Zoning office. See Chapter 175 for detailed information on Site Plan application requirements, Chapter 180 for Special Permit application requirements and Appendix B for the Fee Schedule.

Zoning Department
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