SPECIAL USE PERMIT APPLICATION FORM



Please submit original and 15 copies of this application, relevant plans and impact statement

FOR OFFICE USE ONLY	
Application Number:	Official Date of Receipt:
Applicant:	
Mailing Address:	
Telephone Number:	
Email Address:	
Property Owner:	
Mailing Address:	
Telephone Number:	
Email Address:	
Project Leader*:	
Mailing Address:	
Telephone Number:	
Email Address:	
Property Location:	
Parcel Information:	Map Block Lot
Zoning District:	Lot Size:

^{*} Project Leader is the Architect, Attorney, Engineer, Landscape Architect, Surveyor, or other individual who will be the responsible contact person with the Town.

						_		
Fire District:			На	rbor Ma	nagement [District:		
Water Supply:	Public	Privat	e		Sewage Di	isposal:	Public	Private
Flood Zone:					We	etlands:	Tidal	Inland
				I				
Is any portion of the	Is any portion of the property within 500 feet of the Town Boundary?						☐ No	
Is any portion of the property within the CAM Overlay District?						☐ No		
Is any portion of the property within the GPP Overlay District?							Yes	☐ No
Project Description: Overall development size in square feet, dimensions, intended use and other pertinent information about the proposal.								
List all previous petitions that have been made with respect to the property(ies) before the Planning and Zoning Commission, Zoning Board of Appeals or Inland Wetlands and Watercourses Commission:								
The undersigned owner, or agent, hereby consents to necessary and proper inspections of the property by agents of the Commission at reasonable times both before and after a permit is granted.								
The undersigned declares all information supplied is accurate to the best of his/her knowledge and belief. Owner certifies that he/she is the owner of the property listed on this application. If such information subsequently proves to be false, deceptive, incomplete, or inaccurate, the permit may be modified, suspended, or revoked, by the Commission or its agents.								
Applicant Printed Name			_	Applicant Signature				
Owner Printed Name				_	Owner Sign	aturo		
Owner Fillited Naille	;				Owiler Sign	atul E		
Project Leader Printe	d Name			_	Project Lea	der Signa	ture	

For Special Use Permit Applications involving a Site Plan Review, please read and endorse below

I hereby consent to one or more extensions of the till Statutes Section 8-7d, if required, for action by the Plant to the Site Plan Review component of the Special Use Pe	ning and Zoning Commission, on action pertaining			
Applicant Signature	Date			
Owner Signature	Date			
Project Leader Signature	Date			
Acknowledgement of financial responsibility for required studies, information and/or third party review The undersigned acknowledges that per Section 3.9.3 of the Town of Stonington Planning and Zoning Fee Ordinance the Town will collect payment for direct costs of materials and services performed by professionals, other than Town employees, including but not limited to specialized inspection, third party professional certifications, legal, stenographic and transcription services associated with an application, or require an applicant to provide certifications, inspections, and/or professional consultant reports at the applicant's expense. The payment of additional costs shall not prohibit the Town of Stonington from requiring performance or forfeiture bonds to ensure the successful completion of all work as may be prescribed in the respective land use regulations.				
Applicant Signature	Date			
Owner Signature	Date			
Project Leader Signature	Date			

SPECIAL USE PERMIT - Complete Application Checklist

Effective June 21, 2004; Revised July 20, 2010

X = ITEM PROVIDED W = WAIVER REQUESTED

Impact Statement per Section 8.8.1 (ZR 6.1.2.1)
Type 2 Site Plan per Sections 8.3 and 8.4 (ZR 6.1.2.2)
Architectural Elevation Drawings & Landscape Plan per Section 2.16 (ZR 6.1.2.3)
Water Impact Study (Quality and Quantity) (ZR 6.1.2.4.1)
Sanitary Sewer Impact Study (ZR 6.1.2.4.2)
Stormwater Drainage Analysis per Section 8.4.2.6 (ZR 6.1.2.4.3)
Erosion & Sedimentation Control Report per Section 7.6 (ZR 6.1.2.4.4)
Traffic Impact Study per Section 6.6.23 (ZR 6.1.2.4.5)
Archaeological Study per Section 6.6.24 (ZR 6.1.2.4.6)
Soils Report, Test Pit Data and Mapping (ZR 6.1.2.4.7)
Shadow Plan per Section 7.14.2 (ZR 6.1.2.5)
Scaled 3-Dimensional Model or Graphic Equivalent per Section 6.2 (ZR 6.1.2.6.1)
Flood Hazard Report per Section 7.7 (ZR 6.1.2.6.2)
School Impact Evaluation Report (ZR 6.1.2.6.3)
Application Fee per Town Ordinance – See ZR Appendix 3 (ZR 6.1.2.7)
Legal Description of property/site (ZR 6.1.2.8)
Phasing Requirements for projects over 24 dwelling units per ZR 6.2 (ZR 6.1.2.9)
Written waiver request(s) at time of application submission (ZR 6.1.2.10)

The Planning & Zoning Commission may waive one or more of the above application documents by majority vote, provided that such request is made in writing at the time of application submission, describing in sufficient detail why such information is not relevant to the Special Use Permit application. This wavier shall not apply to application fees. If an application lacks information required by these Regulations, including waivers that have not been requested and justified, such deficiencies shall be noted in the staff report to the Commission, a copy of which shall be provided to the applicant. Incomplete applications risk denial.