



**Redding Zoning Commission – Application Form
Town of Redding, Connecticut
Site Plan Approval**

All Applications shall consist of:

1. Letter of Intent
2. Completed Application Form
3. 13 Copies of site plan and all supporting materials

Date: _____

Name/Address of Owner of Record:

Name/Address of Applicant (if different):

Type of Application: Site Plan-Commercial Zone
 Site Plan – Residential Zone (with Special Permit Application)
 Site Plan Amendment
 Other (describe)

Required with Application Form:

Letter of Intent Y N

Application Fee _____

Postage/Other Fees (as required) Y N Amount(s): _____

Additional Information (per Zoning Regulation Section(s)): _____

For Commission Use ONLY:

Date Accepted: _____ Public Hearing Date: _____

Referral to: _____ Redding Planning; _____ Regional Planning; _____

Other Town Agencies, Municipalities, Regional Agencies
(list) _____

Status: Approved Denied Date: _____

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Check List

Site Plan Information

	<u>Req'd</u>	<u>Provided</u>
1. A-2 Survey	_____	_____
2. Seal (wet/raised) of __Surveyor __Engineer __Architect	_____	_____
3. Scale – no less than 1"=40'	_____	_____
4. North Arrow	_____	_____
5. Dates __Prepared and/or __Revision	_____	_____
6. Nearby Roads	_____	_____
7. Filed Survey Map number – from Town Land Records	_____	_____
8. Names, Address, Boundaries of abutting property owners	_____	_____
9. Name/Address of property owner	_____	_____
10. Name/Address of developer	_____	_____
11. Name/Address of plan preparer	_____	_____
12. Lot lines	_____	_____
13. Easements and/or rights of way	_____	_____
14. Topography 5' or less – existing (100' onto abutting properties)	_____	_____
15. Topography – 2' or less for proposed developed areas	_____	_____
16. Existing significant Natural Features (includes: ponds, streams, wetlands, trees (>12" DBH) rock walls, 100 year flood zone and line, etc.)	_____	_____
17. Existing Structures	_____	_____
18. Proposed New or Modified Structures (show elevation @ ground floor level, number of stories, entrances/exits, exterior elevations)	_____	_____
19. Proposed Uses of Buildings and structures	_____	_____
20. Existing and/or proposed:	_____	_____
___ Roads, Driveways, Parking areas, Sidewalks, Loading areas	_____	_____
___ retaining walls and cross section	_____	_____
___ Erosion and storm water control	_____	_____
___ Wells, septic/sewage treatment (Incl Health Officer Approval)	_____	_____
___ Signage, dimensions and structure	_____	_____
___ Utilities (Incl garbage and screening)	_____	_____
___ Landscaping	_____	_____
___ Wells within 100' of site boundary	_____	_____
___ Architectural details	_____	_____
___ Lighting Plans and exterior fixture details	_____	_____

EFFECTIVE OCTOBER 1, 2006 PUBLIC ACT 06-53 / C.G.S. Sections 8-3i
Any project located within a public water supply aquifer protection area or watershed area must be notified by applicant. (See attached)

IF THIS APPLICATION REQUIRES PUBLIC WATER/SEWER IN GEORGETOWN APPROVAL MUST BE OBTAINED IN WRITING FROM THE WATER POLLUTION CONTROL COMMISSION BEFORE ZONING CAN APPROVE PERMIT.

Watershed or Aquifer Area Project Notification Form

REQUIREMENT:

Within seven days of filing, all applicants before a municipal Zoning Commission, Planning and Zoning Commission, Zoning Board of Appeals or Inland Wetlands Commission for any project located within a public water supply aquifer or watershed area are required by Public Act No. 06-53 of the CT General Statutes to notify The Commissioner of Public Health and the project area Water Company of the proposed project by providing the following information.

To determine if your project falls within a public water supply aquifer or watershed area visit the appropriate town hall and look at their *Public Drinking Water Source Protection Areas* map. If your project falls completely within or contain any part of a public water supply aquifer or watershed you are required to complete the following information.

Note: You will need information obtained from the *Public Drinking Water Source Protection Areas* map located in the appropriate town hall to complete this form.

Step 1: Have you already notified the CT Department of Public Health (CTDPH) of this project?

- No, Go to Step 2
- Yes, I have notified DPH under a different project name - Complete steps 4-6
- Yes, same name different year - Notification Year Complete steps 4-6

Step 2:

1. Name of public water supply aquifer your project lies within:
2. Name of the public water supply watershed your project lies within:
3. Public Water Supply Identification number (PWSID) for the water utility:

Step 3: For 1-5 Check all that apply

1. My project is proposing:

- Industrial use; Commercial use; Agricultural use; Residential use;
- Recreational use; Transportation improvements; Institutional (school, hospital, nursing home, etc.);
- Quarry/Mining; Zone Change, Please Describe:
- Other, Please describe:

2. The total acreage of my project is:

- Less than or equal to 5 acres Greater than 5 acres

3. My project site contains, abuts or is within 50 feet of a:

- Wetland; Stream; River; Pond or Lake

4. Existing use of my project site is:

- Grassland/meadow; Forested; Agricultural; Transportation; Institutional (school, hospital, nursing home, etc.); Residential; Commercial; Industrial; Recreational; Quarry/Mining
- Other Please Describe:

5. My project will utilize:

- septic system; existing public sewer; new public sewer; agricultural waste facility;
- existing private well; new private well; existing public water supply;
- new public water supply, if new have you applied for a certificate of public convenience and necessity from DPH? Yes No

6. My project will contain this percentage of built up area (buildings, parking, road/driveway, pool): Less than or equal to 20% Greater than 20% to 50% Greater than 50%

Step: 4 Applicants Contact Information:

Name:

E-mail address:

Telephone:

Fax number:

Step 5: Please provide the following if available:

Project name:

Project site address:

Town:

Project site nearest intersection:

Project site latitude and longitude:

E-mail completed form to dph.swpmail@ct.gov