## ZONING COMMISSION

Town of New Fairfield 203-312-5646 Fax 203-312-3508

## SPECIAL PERMIT APPLICATION

Address: \_ (s) of the Zoning Regulations: Application is hereby made for Special Permit per section 8.2 pursuant to the following section Phone No: Owner (s) of Record: Nine Dunham Phone No: 703 948 0481 Project Address: Mailing Address: 246 PINE HILL COPED Applicant: HMHOTH Date: 11/23/2024 Please type or print: (203) - 948 - 0481 DONARM DATTE 9 DUNHAM DRIVE CAPIANIS 4.13-Application Number 38-21-024 Map: 24 Block: 15 . Lot: 있え

For the following purpose: Stone MATERNAL & UGAT RABNICATION

Historical

In compliance with the requirements of the Zoning Regulations, I am hereby submitting the fee, plans, documents and additional information as required.

( )Fee of \$460.00\* as specified in Section 10.1.2C (\$200.00 application, \$60.00 State Surcharge and \$200.00 Two Legal Notice for Public Hearing and Results of Application Advertised in News Paper).

() Letter of authorization from property owner stating an agent may apply for permit. Signature on letter must be original not copied, facsimile or e-mail.

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() Ten (10) copies of site plans including a A-2 SURVEY by a CT Land surveyor with existing and proposed percentage of impervious surfaces together with existing proposed site improvements including building, parking landscaping access & egress and proposed signage. A-2 survey shall be drawn at a scale of at least 1" = 50°, and shall be on sheets either 36" x 24", 18" x 12" or 18" x 24" (Check regulations for further details).

- () Ten (10) copies of a narrative report prepared by a Connecticut licensed engineer as required in Section 6.7 Storm Water Management Plan.
- () Report from Health Department on adequacy of sewage disposal system and water supply. Applicant to write letter requesting such report. Complete description of project to be included.
- () Proposed use(s) written statement describing in detail proposed use(s)
- () Traffic Study Ten (10) copies if development anticipates the generation of more than one hundred (100) vehicular trips per day.
- ( ) Report (s) from other Town Agencies (if required) as follows:

() Copy of additional information as follows:	() Other Agency (please specify)	() Zoning Enforcement Officer	() Inland Wetland Commission	() Fire Marshal
		( ) Water Supply Committee	( ) CT Department of Transportation	( ) Town Engineer

Applicant to write letter requesting such report. Complete description of project to be included.

() Attach a list with the names and addresses of all adjacent property owners including those across any adjacent roadways. Submit proof that all such neighbors have been notified of this proposed activity. These letters shall be sent CERTIFIED MAIL with RETURN RECEIPT. Both certified mail receipt and return receipt shall be submitted to the Commission either before or at the time of Public Hearing.

Signature of owner (date)

Signature of Applicant (date)

\*Fee does not include Zoning Permit Fee (issued by Zoning Enforcement Officer, if required.



