

PL-720

**ZONING COMMISSION**  
Town of New Fairfield  
203-312-5646 Fax 203-312-3508

**SPECIAL PERMIT APPLICATION**

Application Number JP-22-020

Map: 13 Block: 2 Lot: 13

Please type or print:

Date: 5/26/22

Applicant: Jenny Audo

Mailing Address: 47 Byebrook Ct, New Fairfield CT 06812

Project Address: 416 Byebrook Ct, New Fairfield, CT 06812

Phone No: (914) 420-6590

Owner (s) of Record: Kenneth + Jenny Audo

Address: 4 Byebrook Ct, New Fairfield, CT 06812

Phone No: (203) 546-7831

Application is hereby made for Special Permit per section 8.2 pursuant to the following section (s) of the Zoning Regulations:

3.1.2 (L) - Major Home Occupation

For the following purpose: Growing + selling out flowers grown from fenced in flower field, No employees, sold to public from flower stand, farmers market in town and to local businesses (Food Center) @ wholesale market buy price

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.

( ) 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:

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

**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.

 31 May 2022  
Signature of owner (date)

 5/26/22  
Signature of Applicant (date)

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

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**For Office Use Only**

This Application Complies       Does Not Comply with the requirements of the zoning regulations.

Application Complete: \_\_\_\_\_ Yes \_\_\_\_\_ No

The application fails to comply as follows: \_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Review by Zoning Enforcement Officer \_\_\_\_\_ Date \_\_\_\_\_

Date of Receipt by Zoning Commission: \_\_\_\_\_

Date of Scheduled Public Hearing: \_\_\_\_\_

Date of Commission Action: \_\_\_\_\_ Legal Notice Published \_\_\_\_\_

Application Approved       Application Denied

Application Approved & Modified

Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_