ZONING COMMISSION

Town of New Fairfield (203)312-5646 Fax: (302)312-3508



¥ Application Number ↑

SPECIAL PERMIT APPLICATION

Map: <u>20</u> Block: <u>4</u> Lot: <u>99+103</u> -10
Zoning District: $\frac{\cancel{k} - \cancel{y} \cancel{y}}{\cancel{y}}$
Please type or print:
Date: 12/30/23
Applicant: 33 LDS LLC
Mailing Address: 285 WIIMST, NEW YORK NY 10014 Project Address: 33 LAKE DRIVE SOUTH, NEW FAIREDELD CT 06812
Project Address: 33 LAKE DRIVE SOUTH, NEW FAIREDELD CT 06812
Phone No: 646 240 2048
Owner(s) of Record: D3 LDS LLC
Address: 285 W 11 58, NEW YORK, NY 10014
Phone No: 646 240 2048
Application is hereby made for Special Permit per Section 8.2 pursuant to the following Sections(s) of the Zoning Regulations: Regulation Section 6. 4- Crean ton, Removed, Filling,
and Grada of Girth Material
For the following purpose: CONSTRUCTING STONE STEPS 4
PATMWAY AND SITE WORK WITHIN 300'.
OF 440 LINE
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 Newspaper).

() 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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Zoning Special Permit Application



Signature of Owner (date)	Signature of Applicant (date)
12/29/33	12/29/23
signature	anonzation letter from the property owner with a five
	ed permit expeditor to go forward with your application, athorization letter from the property owner with a live
These letters shall be sent CERTIFIED MAI certified mail receipt, and return receipt shall l Public Hearing. (See page 3).	neighbors have been notified of this proposed activity. L with RETURN RECEIPT. A copy of the letter sent, be submitted to the Commission 48 hours prior to the
	of all adjacent property owners including those across any
() Copy of additional information as a Applicant to write letter requesting such re	follows:eport. Complete description of project to be included.
() Other Agency (please specify)	
() Inland Wetland Commission () Zoning Enforcement Officer	() CT Department of Transportation () Water Supply Committee
() Fire Marshal	() Town Engineer
() Report(s) from other Town Agencies (if re	equired) as follows:
() Traffic Study – Ten (10) copies ff develop (100) vehicular trips per day.	oment anticipates the generation of more than one hundred
() Proposed use(s) – written statement descri	bing in detail proposed uses(s).
() Report from Health Department on adequation Applicant to write letter requesting such re	acy of sewage disposal system and water supply. eport. Complete description to be included.
	percentage of impervious surfaces together with existing ag, parking landscape access and egress, and proposed
	ald consist of site plans including a A-2 SURVEY by a CT
	proposal and use such as a required engineered site plan,
building, parking landscape access and egress shall be drawn at a scale of at least 1" = 50', a (check regulations for further details). See Zo	and shall be on sheets either 36"x24"
impervious surfaces together with existing p	roposed site improvements including
() Two (2) copies total which should consist SURVEY by a CT Land surveyor with exist	

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

For Office Use Only

() This Application Complies with the requirements of the Zoning Regulations. () This Application Does Not Comply with the requirements of the Zoning Regulations. Application Complete: Yes No The application fails to comply as follows: Comments: Reviewed 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: