



City of Ansonia

253 Main Street
Ansonia Connecticut 06401

PLANNING AND ZONING COMMISSION

APPLICATION FOR APPROVAL OF SITE PLAN

(To Be Submitted to the Planning and Zoning Commission with copy of application for Zoning Permit)

Date Received: _____

Application Fee: _____

Zoning Permit #: _____

This application is hereby submitted as required by Section: _____ of the Ansonia Zoning Regulations, entitled: _____

A. Identification of Applicant and Property

1. Owner: _____

Telephone: _____ Address: _____

2. Applicant: _____

Telephone: _____ Address: _____

3. Location of Property: _____

Assessor's Map: _____ Block: _____ Lot: _____

Subdivision (if any) _____ Lot # _____

4. Zoning District: _____

B. Proposed Use

1. Describe (refer to Schedule B) _____

2. Site Plans attached: Yes _____ No: _____ If no, explain: _____

Attachment #1: Maps and Plans: List titles, dates and preparer of site plans, architectural plans and other plans that are part of the submission:

1. _____
2. _____
3. _____
4. _____
5. _____

Attachment #2: Project Data:

1. Area of Lot:- _____ square feet
2. Floor Area (sq. ft.)

	<u>First</u>	<u>Second</u>	<u>Third</u>	<u>Other</u>
a. <u>Existing</u>	_____	_____	_____	_____
b. <u>Proposed</u>	_____	_____	_____	_____
3. Total Building Coverage of Lot (sq. ft.): Existing _____ Proposed _____
4. No. of off-street Parking Spaces Loading Spaces
 - a. Required _____
 - b. Existing _____
 - c. Additional Proposed _____
5. Outside Storage Area: _____ sq. ft.
6. Total Ground Coverage by Paving: _____ sq. ft.
7. Does any part of the lot involve:
 - a. Special Flood Hazard Area Yes _____ No _____
 - b. Regulated wetlands or watercourse Yes _____ No _____
8. Provision to be made for:
 - a. Sewage Disposal _____
 - b. Water Supply: _____
9. Are any toxic or other hazardous substances (as defined in the Federal EPA list of priority pollutants, Sec. 3001 of the R.C. & R. Act or Connecticut Hazardous Waste Regulations) to be store, used or handled on the premises? Yes _____ No _____
 - a. If yes, attached a list of the substances and maximum quantities and a description of how is to be managed.

Signature: _____ Date: _____
Owner/Applicant

FOR OFFICE USE ONLY

1. Action by the Planning and Zoning Commission

- a. Date of meeting at which received: _____
- b. Public Hearing (if any) _____
- c. Time extension granted by applicant _____
- d. Date of Commission action: _____

- Approved
- Approved subject to modifications or conditions
- Disapproved

e. Notice of Decision

- To Applicant _____
- Legal Ad _____

Chairman

Recording Secretary

2. Checklist of Action by Other Involved Agencies:

- Zoning Board of Appeals _____
- City Sewer Connection _____
- City Inland Wetland Agency _____
- Valley Health Department _____
- ConnDOT - Highway Department encroachment _____
- State Traffic Commission Sec. 14-311 Permit _____
- City Fire Marshal _____
- Other _____

APPENDIX A

ACCESSORY OR IN-LAW APARTMENTS

To be submitted as supporting information when the application is for approval of site plan is submitted pursuant to the requirements of Section 720.14 of the Zoning Regulations.

1. Total floor area of existing single family structure: _____

2. Total floor area of proposed accessory or in-law dwelling: _____

3. Are exterior building alterations proposed? ____Yes ____No

4. Number of off-parking spaces proposed: _____

5. Class A-2 Property survey prepared by: _____

6. Sewage disposal:

a. Approval by the Valley Health Department granted on: _____

OR

b. Approval granted by Ansonia's WPCA granted on: _____

(Attach notice of approval granted)

7. Affidavit attesting to proposed occupancy attached.

8. Comments:

Signature

Date: _____ Owner/Applicant: _____