

Planning and Zoning Commission (revised 3/2019)

Borough of Stonington

P.O. Box 95

Stonington, CT 06378

(860) 535-1298

SITE PLAN APPLICATION

Please leave this section blank

Date Received: _____ Application # _____

Fee Paid \$ _____

General Information: *Please fill in all applicable spaces*

Property Address: _____

Zoning District: _____ Map _____ Block _____ Lot _____

Application/Agent: _____ Telephone _____

Address: _____

Signature: _____ Email: _____

Property Owner: _____ Telephone _____

Address: _____

Signature: _____

Proposed Activity or Construction: *Please fill in all applicable spaces*

New Construction _____ Substantial Improvement _____ Renovation _____

Fence higher than 4'-0" _____ Design Review _____ Other _____

Existing Use _____ Proposed Use _____

Project Description _____

Permit Information: *Please circle all that apply and explain as necessary*

Site Plan Required: Y N Permitted Use: Y N Special Permit Use: Y N

Accessory Use: Y N Conforming Use: Y N Coastal Site Plan: Y N

Flood Zone: V-__ AE-__ NA Floor Elevation _____ Variance: Y (*specify #*) _____ N

Notes: _____

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Lot Information: *Please fill in applicable spaces and attach calculations*

Lot Area (SF): Existing _____ Required _____ Conforming Y N

Lot Coverage: Existing _____ Proposed _____ Max. allowed _____

Floor Area Ratio: Existing _____ Proposed _____ Max. allowed _____

Front Yard: Existing _____ Proposed _____ Required _____

Rear Yard: Existing _____ Proposed _____ Required _____

Side Yard: Existing _____ Proposed _____ Required _____

 Existing _____ Proposed _____ Required _____

Height: Existing _____ Proposed _____ Max. allowed _____

Frontage: Existing _____ Proposed _____ Required _____

Planning and Zoning Commission Record of Decision: *For Commission use only*

Meeting Date: _____ Public Hearing Date: _____

Motion: _____

Made by: _____ Seconded: _____

Signature: In Favor Against Abstain
