

Town of Chester

203 Middlesex Avenue
Chester Connecticut 06412



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Planning & Zoning

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APPLICATION FOR A ZONING PERMIT

FEE: \$30 Up to \$5,000 value

Plus \$1 for each additional \$1,000 in value

Plus CT D.E.E.P. fee of \$60

1. Property Owner's Name: _____

2. Property Owner's Address: _____

3. Telephone Number: _____ Email: _____

4. Applicant's Name: _____

5. Applicant's Address: _____

6. Phone Number: _____ Email: _____

7. Location of Premises: _____

Street Number

Street Name

Map _____ Lot _____ Zoning District _____ Cost of Improvements _____

8. Description of all proposed uses and all proposed improvements: _____

9. Attach **SITE PLAN** clearly showing:

- Location and dimensions of all boundaries of the lot
- Lot acreage and that of any portion of it represented by tidal and/or inland wetlands and/or watercourses.
- Location and exact dimensions of all existing and proposed structures and other improvements.
- Exact distance of all existing and proposed structures and other improvements from all lot boundary lines.
- Name and location of each street abutting the lot, and the location and width of any other way affording access to the lot from a street.
- Exact percentage of the lot area covered by existing and proposed structures.
- Source of the water supply.
- Location and method of sanitary waste disposal.

I certify that all of the information on this application, including that shown on the site plan, and on any attachments, is correct as of the date below and is complete to the best of my knowledge.

Owners: _____ Date: _____

Applicants: _____ Date: _____

Application Number: _____

Date Received: _____

Fee Paid: _____ **Check #/Cash:** _____

Granted: _____ **Denied:** _____

Contractor: _____

Telephone Number: _____

Email: _____

Zoning Compliance Officer: _____

Date: _____