

APPLICATION FOR ZONING REVIEW REQUIREMENTS

- a. Application for Zoning Review – Fee \$15.00 – Required if changing the footprint or outline of the building, e.g. (building addition, attached garage, porch, attached deck, stairs) or adding a structure to the property, e.g. (detached garage, shed, detached deck, AC unit, generator, in-ground or above-ground pools, free-standing signs, inground or above-ground tanks, gazebo or pergola).
- b. Other applicable permits are required to accompany the zoning application depending on the type of work (building, mechanical, pool, sign or tank permit applications).
Exception: Only submit a plot plan and zoning application for sheds that are 200 square feet or less and detached decks 200 square feet or less and no more than 30 inches off the ground.
- c. 1 copy of official plot plan with changes in ink showing where the structure or add-on is to be placed/positioned or located and its distance to the property lines. Changes need to be initialed and dated. (Copies are \$1.00).
- d. Erosion and Sedimentation Bond Form and a \$500 check – This is required only for inground pools, additions, and any new structures that involve soil disturbance. It is held until completion of the project and returned once the final inspection has been done.

Mail the Application for Zoning Review, plot plan, other applications if needed and any supplemental drawings/documents with a check made payable to “Town of Newington” to the following address:

**Town of Newington
Attention: Zoning Department
200 Garfield Street
Newington, CT 06111**

APPLICATION FOR ZONING REVIEW

The undersigned hereby makes application for Zoning Review under the Zoning Regulations of the Town of Newington. Application is made for the following:

- () New Building () Shed () Addition () Deck () Above-ground Swimming Pool
() Inground Swimming Pool () Free-Standing Sign () Change of Use () Keeping of Hens () Mechanical

Address: _____ Zoning District: _____

PROPOSED ACTIVITY

Description of Work: _____

Dimensions: _____ X _____ Height: _____ TOTAL AREA (SF): _____

Property Owner Name: _____

Applicant/Authorized Agent Name (if not owner): _____

Address: _____

Email Address: _____ Phone #: _____

Application Fee: \$15.00

Signature of owner or authorized agent

Printed Name

If this project includes site disturbance, please fill out contact information below. CT DEEP Requires the Town be provided with the name and contact information for the person responsible for Erosion and Sedimentation while the job is in progress. **\$500 check to be submitted with Erosion and Sedimentation Bond form** (check held until project is complete)

Name: _____ Title: _____

Phone #: _____ E-Mail: _____

BOX TO BE FILLED IN BY STAFF ONLY

\$15.00 Fee: Check # _____ Cash ____ Copies: _____ Received By: _____ Date: _____

Is the above parcel located within a 100 year or 500 year flood zone? NO __ YES __ If yes, which? _____

Conservation Easement ____ Wetlands ____ Upland Review Area ____ Watercourse ____ None _____

Zoning Review Hereby: Approved ____ Denied _____ Comments: _____

Land Use Enforcement Officer

PERMIT #: _____

This approval, if issued, is based upon the Plot Plan submitted. Falsification, by misrepresentation or omission, or failure to comply with the conditions of approval of this document shall constitute a violation of the Newington Zoning Regulations.