Town of Washington Zoning Commission

Zoning Permit Application
(Not to be used for Special Permits)

1. The undersigned hereby applies for a zoning permit to:
☐ build new building or structure  ☐ add onto a structure  ☐ demolish and rebuild a structure  ☐ lot line revision
☐ install equipment, slab, or patio  ☐ move a building  ☐ change a building to a different use  ☐ erect a sign

2. Subject property address: ____________________________________________________________

3. Owner of subject property per deed: __________________________________________________
   Owner’s preferred/best mailing address: ____________________________________________
   Email: ___________________________      Best Phone: ____________________________

4. Assessor’s Map-Block-Lot (e.g. 09-06-46) _____ - _____ - ______ Zone (e.g. R-1) ____ - ___   Acres_________________

5. Road frontage _____________ Existing % lot coverage _________________ Proposed lot coverage _______________
   (Maximum lot coverage in residential districts is 15% on less than 2 acres, 12.5% on between 2 and 3 acres, and 10% on greater than 3 acres)

6. Brief description of proposed permitted activity (e.g., build 20’ x 30’ addition onto main dwelling):
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________
   Use (e.g., garage) ___________________________   Area of new structure ________ sq. ft.   Max. height ____________
   (See §11.7)

7. Provide a plot plan on a separate sheet of paper showing:
   ☐ Address of property                        ☐ Use of structures (house, barn, garage, etc.)
   ☐ Owner’s name                              ☐ Driveways, parking, abutting streets
   ☐ Date of drawing                           ☐ Locations of utility poles
   ☐ Scale (indicate “not to scale”)           ☐ Front, rear, side setbacks
   ☐ Property boundaries with dimensions        ☐ Setbacks from wetlands and watercourses
   ☐ Acreage or square feet of property         ☐ Water supply with distances per §12.1
   ☐ North arrow                               ☐ Septic system with distances per §12.1
   ☐ Location of existing and proposed structures ☐ Elevations where significant

L:\Zoning Admin\Zoning Application Forms\Zoning App rev 9-23-19
1 of 2
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8. Even if this application does not involve the installation or modification of a septic system, you must provide certification by the Town Health Officer that the lot is suitable for on-site sewage disposal and that the existing or proposed system can accommodate the proposed activity (See Section 2.3).

_______________________________________________________________________________
Signature of Director of Health or authorized agent                   Date

9. Are there wetlands soils and/or watercourses on or within 100 feet of the area of activity? ☐ Yes ☐ No ☐ Not tested

10. Attached a copy of Inland Wetlands Permit, if applicable.

11. Is the subject property located in a designated Historic District? ☐ Yes ☐ No

12. Fee of $85 must accompany this form. This fee includes the application fee of $25 & CT State tax of $60. Please make out a single check to Town of Washington

13. The Mandatory Land Use Pre-Application must be signed by the property owner and submitted with this application.

This application must be filed in the Land Use Office with the Enforcement Officer or Coordinator. The Chairman of the Zoning Commission or the Town Clerk may also receive applications. Incomplete applications cannot be processed. Completed applications will be considered at the next monthly meeting of the Commission (4th Monday) if submitted by 5:00 p.m. the Wednesday before the meeting date.

_____________________________________________  _____________________________________________
Received by       Completed by (print name)

_____________________________________________  _____________________________________________
Title        Signature    Date

_____________________________________________  _____________________________________________
Date Rec’d       Scanned Date

Check# _________    Amt $ ____________________

By __________________   Date ___________________

*If this application is signed by anyone other than the property owner of record, authority must be granted in a separate letter of authorization