

PETITION FOR A ZONE MAP OR ZONE TEXT CHANGE

In accordance with the General Statutes of the State of Connecticut, the undersigned hereby petitions the Cheshire Planning & Zoning Commission for a text change () and/or map change () to the Cheshire Zoning Regulations to permit, amend, or delete the following:

For Zone Text Changes:

Indicate pertinent section/paragraph of Zoning Regulation to be changed.

For Zone Map Changes:

Location of Property: _____

Assessor's Map No.(s) _____

Lot No.(s) _____ Zone _____

Change from present _____ zone to _____ zone.

Reason for Proposed Text and/or Map Change: _____

The following is attached and hereby made part of this petition:

1. For a text change, five (5) copies of the existing and proposed text.
2. For a map change, six (6) copies of a written legal description of the proposed zone boundary and six (6) copies of a map drawn to a scale of not less than 200 feet to the inch, covering the area of the proposed change, and all areas in the Town within 500 feet of the proposed change, and showing for such area the existing and proposed zoning district boundary lines, the existing property lines, and the names and addresses of the current property owners as indicated by the Cheshire Assessor's records.

3. For a map change, the applicant must submit an **affidavit at least ten (10) days** before the hearing stating that notification has been sent to all abutting property owners (including those across the street). The affidavit shall confirm that the notice was mailed at least **fifteen (15) days prior to the hearing and shall list the names, property addresses and mailing addresses**, if different from property addresses. Notification to property owners shall be in the form of letter or postcard and shall specify the date, time, and place of the public hearing.

4. A base fee of \$560.00* and a Public Hearing Fee of \$175.00 is payable by check to "Collector, Town of Cheshire" in the amount of \$ 735.00.

*This includes a \$60.00 State of Connecticut Fee.

Petitioner's Name _____
(Print or Type)

Petitioner's Address _____

Petitioner's Signature _____

Telephone Number _____ FAX # _____

Owner's Name _____
(Print or Type)

Owner's Signature _____

Agent, if other than applicant, to be contacted with regard to this application.

Name _____

Address _____

Telephone Number _____ FAX # _____

This application must be filed in the Planning Office at least seven (7) days prior to the regular Planning & Zoning Commission meeting date.

Disclaimer: Additional information may be required, please contact the Planning office for complete application packets.