## TOWN OF CROMWELL REQUEST FOR ZONING APPROVAL

\*Areas required for review

*Date of Application//	-	
*Address of proposed activity		
*Applicant Name		
*Applicant Address Evening		
*Phone Number: Day Evening	Cell	
*Email:		
*Email: *Owner Name	Owner Phone	
*TYPE OF WORK		
Addition Accessory Building (shed, gazebo	o) Garage Above Ground Fuel/Ga	s Tank
Sign (indicate: dimension type & quantity) Pool Hot Tub Carport Filling Dec		
Pool Hot Tub Carport Filling Dec	k Other <i>specify</i> :	
New Construction - Foundation As-Built m	ust be approved before building const	truction commences
Erosion and Sediment Bond Required Yes Zoning District Assessor Map#	N/A E & S Bond # Amour Block# Lot#	nt \$
ZBA Approved Yes N/A Vol	lume Page	
*Are there Wetlands/Vernal Pools or Watercourse requested activity? Yes No	es on this Property or within 100 feet of t	the
Is an Inland Wetland Permit Required Yes	No Permit#	
*Description of proposed activity		
*Dimensions: Height Width Second  *Living Floor Area: First Floor Second	Length	N/A
*Living Floor Area: First Floor Second	l Floor Garage	N/A
Special Permit Required Yes No Record	rd Volume: Page:	
Are the approved mylars signed and filed in the To	own Clerk's Office: Yes N/A	
Map file numbersto	1 1 1/ 1: 441 4	:f.V 1 9
*Indicate if the proposed work will have any impa No Yes How?	ict on drainage and/or grading at the site	, 11 Yes, now?
Any possible impact may require additional inform	nation and time for staff review.	
This request, if approved, is based upon information		n by misrepresentation
or omission, or failure to comply with the condition		
Cromwell Zoning or Wetlands Regulations.		
*Signature:		
*Check One:	Owner Applicant Agent	
A FINAL ZONING INSPECTION IS REQ	IIIDED Planca call 860 632 3422 upos	n completion
A FINAL ZOMING INSI ECTION IS REQU	OIKED- Ticase can 600-032-3422 upon	n compiction.
~~~~~For Office	ce use only	
Approved by:	Date:	-
Rejected by:	Date:	-
Condition(s) of approval:		