

(Submit in triplicate. Two copies will be returned to Applicant)

# THE PINE ORCHARD ASSOCIATION ZONING AUTHORITY

## *APPLICATION FOR SPECIAL PERMIT*

Filing Fee: \$100

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

If applicant represents a firm, corporation, or partnership, give full name of same:

Name of Landowner of Record: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Location of Property: \_\_\_\_\_

Land Surveyor, Engineer, Architect: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone/Cell Number: \_\_\_\_\_ Phone/Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

*Submit both a PDF\* and physical copy of Plans, Maps, and/or Surveys related to this application:*

Is this a division of an existing lot or parcel?  Yes  No

Is this an application for a subdivision of three or more lots?  Yes  No

Is this a change from non-conforming use to another that is different in nature and purpose?  
 Yes  No

Describe the purpose for which the new facility is intended:

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\* (PDF copy is required of all prints larger than size "A" (8½ x 11). They can be provided on an optical disk or emailed to om@poa-ct.org)

**If a subdivision, answer the following:**

Area to be subdivided: \_\_\_\_\_ acres

Is a new street proposed?  Yes  No

Will Public **Water** Supply serve lots?  Yes  No

Will Public **Sewers** service lots?  Yes  No

Will Public **Gas** supply serve lots?  Yes  No

Will **buried Public Power** supply serve lots?  Yes  No

**The Owner and Applicant hereby grant permission to The Pine Orchard Zoning Authority and its authorized agents to enter upon the premises proposed for Special Permit under this application for inspection and other actions related to the enforcement of the Zoning Ordinances of The Pine Orchard Association.**

(Signed) \_\_\_\_\_ (Signed) \_\_\_\_\_  
Applicant Owner

Print Name: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_

**Any approvals given by The Pine Orchard Zoning Authority will become void unless:**

- (1) A Branford Building Permit is obtained within six months and unless a bona fide start has been made on construction or other matters approved within one year; and unless:
- (2) Approval of the septic system is obtained from the Director of East Shore District Health Department for new construction or for conversion from seasonal occupancy to year-round occupancy of a building.

<p><b>Record of Action Taken by Zoning Authority:</b></p> <p>_____</p> <p>Date: _____ Signed _____</p>
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Applicants must notify all adjoining property owners, as well as those directly across the street, of the hearing, listing the **time, date, and place of the hearing by Certified Mail**, Return Receipt Requested (green card). These green cards are required proof of mailing and must be submitted at the time of the hearing. Letters of notice containing this information signed by abutting property owners may be substituted as proof of notification. Abutting property is any which touches the property seeking approval on any side, including vacant lots. This applies to property directly across a road from any part of the property in question.