



TOWN OF EAST HAMPTON  
Planning and Zoning Commission  
1-860-267-7450  
www.easthamptonct.gov

RECEIVED  
JAN 31 2020  
TIME \_\_\_\_\_

PZC PZC-20-003  
Date 1/30/20

Fee Paid \$920-  
Check # 6113117-8  
Rec'd. By [Signature]  
MAP 02A BLK 47 LOT 25  
ZONE \_\_\_\_\_  
PHONE (860) 682-5157  
EMAIL 2 Realtor Lisa S. @ gmail.com

LOCATION 50 Main St.

PROJECT NAME 50 Main St.

APPLICANT Lisa Sherman  
Mailing ADDRESS Curr. P.O. Box 446 Middletown Ct 06457

CONTACT PERSON Lisa Sherman

OWNER H.U.D. Home  
ADDRESS \_\_\_\_\_

SURVEYOR/ENGINEER \_\_\_\_\_  
ADDRESS \_\_\_\_\_

ATTORNEY \_\_\_\_\_  
ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_  
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PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_

APPLICATION TYPE (application must be completed in FULL in order to be accepted)

- 1. SUBDIVISION /RESUBDIVISION /CONSERVATION SUBDIVISION NO. OF LOTS \_\_\_\_\_
- 3. SITE PLAN \_\_\_\_\_ MODIFICATION \_\_\_\_\_ Residential  Commercial \_\_\_\_\_
- 4. SPECIAL PERMIT---SECTION \_\_\_\_\_ OF THE ZONING REGS. FOR \_\_\_\_\_
- 5. ZONE CHANGE---FROM R-1 to PO1R TO \_\_\_\_\_
- 6. AMENDMENT TO ZONING REGULATIONS 5.4.A PO1R Zone
- 7. LAKE POCOTOPAUG PROTECTION AREA \_\_\_\_\_
- 8. ACTIVE ADULT NO OF UNITS \_\_\_\_\_
- 7. OTHER (DESCRIBE) \_\_\_\_\_

APPLICATION REQUIREMENTS: This application and 10 sets of plans shall be submitted to the Planning Office and shall be received by the Commission at the next regularly scheduled meeting. (see meeting schedule for deadline dates)

A complete application shall consist of an application, fees, maps /plans( A-2 survey) ,engineers report including drainage calculations and watershed calculations( pre and post), bond estimates, hydrology report, environmental studies, waiver requests and traffic study where applicable

Preliminary discussions are highly recommended for subdivisions 5 lots & over and for larger Special Permit Applications  
Abutters notice receipts (green cards) must be handed in to the Planning Office prior to the meeting

APPLICANTS SIGNATURE Lisa Sherman DATE 1/30/20

OWNER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

The owner and applicant hereby grant the East Hampton Planning and Zoning Commission and/or it's agents permission to enter upon the property to which the application is requested for the purpose of inspection and enforcement of the Zoning Regulations and Subdivision Regulations of the Town of East Hampton.