

Office Use Only

Project ID#

Address:

MBL:

PLANNING & ZONING COMMISSION TOWN OF EAST HAMPTON

## Minimum Requirements for Submission of Application to Planning and Zoning Commission

This form must be submitted with your application.

Application Requirements are based on the application type selected on application form.
Site Plan Review/Modification (See Section 9.1 for details) Pre-Application Meeting — Date of Meeting Complete Application Form Complete Chatham Health District Application Form Fee Paid Site Plan (11 Copies) — See Section 9.2.C.2 for specifications Drainage Calculations in Compliance with Section 7.5 Report from Fire Marshal Bond Estimates As Required, See Section 9.2.C.2
Special Permit (See Section 9.2 for details) Pre-Application Meeting — Date of MeetingComplete Application FormComplete Chatham Health District Application FormFee PaidSite Plan (11 Copies) - See Section 9.2.C.2 for specificationsPending Approval from IWWADrainage Calculations in Compliance with Section 7.5Pending Approval or report from Fire MarshalPending Approval or report from Public WorksTraffic Study (As Required)Bond Estimates (As Required)Public Hearing Requirements
Zone Change (See Section 9.3 for details) Complete Application Form Fee Paid A-2 Survey of Property showing surrounding properties and respective zone (10 Copies) Reports from Chatham Health District, Fire Marshal, Police Dept. and Public Works Public Hearing Requirements
Amendment to Zoning Regulations (See Section 9.3 for details) Complete Application Form Fee Paid Existing Regulation with proposed Amendments (10 Copies) Rationale for Amendment (10 Copies) Reports from Chatham Health District, Fire Marshal, Police Dept. and Public Works Public Hearing Requirements
I certify that this application is complete Manue Date: 2 18 202

The Commission reserves the right to add additional requirements in accordance with the Regulations.

Only Complete Application Packages Will Be Accepted



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



Form PZC1 5/20

PZC PZC-21-006 Date	Fee Paid \$210.00 Check # CASH	
LOCATION EAST HAMPION-	MAPBLKLOT_44	
PROJECT NAME Deek mendow	ZONE 203 - 8872499	
APPLICANT 41 Smith ST ADDRESS	PHONE_EMAIL_pourcd Concreteagy	
CONTACT PERSON James MARINO	PHONEEMAIL	
OWNER JAMES MARIODO ADDRESS 411 SMY ST. E. AST Namping Clo 61124	PHONEEMAIL	
SURVEYOR/ENGINEER JOE / FOICE HOLLOW RC MAN BOROX	PHONE_860~600.1800 EMAIL_	
ATTORNEYADDRESS	PHONE	
APPLICATION TYPE (application must be <u>completed</u> in FULL in order to be accepted)		
1. SUBDIVISION /RESUBDIVISION /CONSERVATION SUBDIVISION NO. OF LOTS  3. SITE PLANMODIFICATIONResidentialCommercial  4. SPECIAL PERMITSECTIONOF THE ZONING REGS. FOR  5. ZONE CHANGEFROMTO  6. AMENDMENT TO ZONING REGULATIONS		
APPLICATION REQUIREMENTS: This application and 10 sets of plans shall be submitted to the Land Use 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 5 Abutters notice receipts (green cards)must be handed in to the Planning Office prior to the median between the commendation of the property of	Special Permit Applications eting	
APPLICANTS SIGNATURE JAMES MARCHIO	DATE 2 / 18 21	
OWNER'S SIGNATURE TAMES MARNOT	DATE 2 18-71	
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.		