



TOWN OF EAST HAMPTON  
Planning and Zoning Commission  
1-860-267-9601  
www.easthamptonct.gov

RECEIVED  
APR 4 2019  
TIME \_\_\_\_\_

PZC PZC-19-006  
Date 4-4-2019

Fee Paid 9/10  
Check # 3781  
Rec'd. By JDD

LOCATION 201 West High

MAP 12 BLK 36 LOT 3-1

PROJECT NAME \_\_\_\_\_

ZONE \_\_\_\_\_

APPLICANT West High Enterprises LLC  
ADDRESS 244 Middletown Ave

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

CONTACT PERSON Wayne Rand

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

OWNER West High Enterprises LLC  
ADDRESS 244 Middletown Ave

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

SURVEYOR/ENGINEER Boscom + Benjamin  
ADDRESS 360 Main Street Durham CT

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

ATTORNEY Weber + Carrel  
ADDRESS 24 Cedar Street New Britain

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 \_\_\_\_\_ TO \_\_\_\_\_
- 6. AMENDMENT TO ZONING REGULATIONS
- 7. LAKE POCOTOPAUG PROTECTION AREA \_\_\_\_\_
- 8. ACTIVE ADULT NO OF UNITS \_\_\_\_\_
- 7. OTHER (DESCRIBE) Parking Lot 201 West High Building D

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 [Signature] DATE 4/4/19

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

The owner and applicant hereby grant the East Hampton Planning and Zoning Commission and/or its 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.

**PLANNING AND ZONING FEE SCHEDULE**

Note: Each application requires an additional \$60 fee to be submitted to the State (effective 10/09)

\$ 60.00

**SUBDIVISION APPLICATION & CONSERVATION SUBDIVISION**

No. of lots _____		
A fee of \$500 plus the sum of _____	\$ 150/ lot	_____
1-5 lots _____	\$ 150/ lot	_____

Plus a developer's fee of 3% of the bond filed for subdivisions requiring public improvements to be paid at the time bonds are filed with the Town and prior to any construction

**SITE PLAN REVIEW**

Residential/Commercial _____	\$ 150	_____
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Commercial, Industrial, Designed Development: Calculated by total sq ft of impervious surface

New Construction		
Square Feet _____		
Less than 3000 Sq Ft _____	\$ 150	_____
3001 to 5,000 Sq Ft _____	\$ 250	_____
5001 to 10,000 Sq ft _____	\$ 600	_____
10,001 to 15,000 Sq ft _____	\$ 1100	_____
For every additional 5000 Sq Ft _____	\$ 500	_____

**SPECIAL PERMIT**

Special Permit _____	\$ 150	_____
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Commercial, Industrial, Designed Development: Calculated by total sq ft of impervious surface

New Construction		
Square Feet _____		
Less than 3000 Sq Ft _____	\$ 150	_____
Less than 5000Sq Ft _____	\$ 300	_____
5001 to 10,000 Sq Ft _____	\$ 600	_____
10,001 to 15,000Sq Ft _____	\$ 1100	_____
For every additional 5000 Sq FT _____	\$ 500	_____

For Special Permits involving Commercial Properties fees increase by \$50

**SITE PLAN MODIFICAT ION**

Minor Amendment _____	\$ 50	_____
Major Amendment _____	\$ 100	_____

<u>ZONING OR SUBDIVISION REGULATION TEXT CHANGE</u> _____	\$ 300	_____
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<u>CHANGE IN ZONING MAP</u> _____	\$ 500	_____
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<u>LAKE POCOTOPAUG PROTECTION AREA</u> _____	\$ 75	_____
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<u>APPLICATION FOR MULTI-FAMILY, ACTIVE ADULT AND HOD</u> _____	\$ 1000	_____
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Number of unit's _____		
Plus the sum of _____	\$100/unit	_____

Total \$110