



# TOWN OF NORTH BRANFORD

TOWN HALL 909 FOXON ROAD NORTH BRANFORD, CONNECTICUT 06471-1290  
Building Department (203) 484-6008 Engineering Department (203) 484-6009  
Planning & Zoning (203) 484-6010  
Department Fax (203) 484-6018

## TOWN OF NORTH BRANFORD

### APPLICATION FOR SPECIAL USE PERMIT

#### INSTRUCTIONS:

**Submit** the following:

1. Application Form: 1 original and 10 copies
2. Site Plan/Plot Plan: 11 copies drawn to scale
3. Architectural Plans (if required): 11 copies
4. Any additional information necessary (i.e. floor plans, etc.).
5. Fee: Check made payable to the Town of North Branford (see attached fee schedule).
6. Certified receipts for abutters (submit prior to meeting).

#### APPLICANT MUST:

1. **NOTIFY** the Regional Water Authority if your property falls within the watershed area within seven (7) days of application to the Town. Application to the RWA is attached. Submit copy to the Planning office also.
2. **POST** "Public Hearing Sign" *fifteen (15) days* prior to the meeting (sign provided to you by the Town).
3. **MAIL** abutters notices (via certificate of mailing) at least *fifteen (15) days* prior to the meeting (see sample attached). Verify owner info is correct on list prior to mailing letters.
4. **RETURN** certified receipts to the Planning Office prior to the meeting.

**APPLICATION FOR SPECIAL USE OR TEMPORARY SPECIAL USE**

The undersigned hereby makes application to the Planning and Zoning Commission of the Town of North Branford, Connecticut, for approval of a SPECIAL USE or TEMPORARY SPECIAL USE under the conditions and terms of the Zoning Regulations.

1. Address of Property: \_\_\_\_\_  
Present Zone: \_\_\_\_\_ Map: \_\_\_\_\_ Lot: \_\_\_\_\_

2. Owner of Property: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Cell #: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

3. Applicant/Agent: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Cell #: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

4. Has a previous application been filed for the premises? \_\_\_\_\_  
If Yes, give date(s) of hearing(s) \_\_\_\_\_

5. Cite the particular use for which a SPECIAL USE or TEMPORARY SPECIAL USE is requested: \_\_\_\_\_  
\_\_\_\_\_

a. Schedule A, Line # \_\_\_\_\_

6. In accordance with Section 62.5 (Special Uses), is this Application accompanied by the following:

- |                                       |           |          |
|---------------------------------------|-----------|----------|
| a. Statement of Use (62.5.1)          | Yes _____ | No _____ |
| b. Site Plan (62.5.2)                 | Yes _____ | No _____ |
| c. Architectural Plans (62.5.3)       | Yes _____ | No _____ |
| d. Application Fee (62.11)            | Yes _____ | No _____ |
| e. Zoning Permit Application (62.2.4) | Yes _____ | No _____ |

7. In accordance with Section 43 (Gravel Removal), is this Application accompanied by the following:

- |                                   |           |          |
|-----------------------------------|-----------|----------|
| a. Excavation Maps & Plans (43.4) | Yes _____ | No _____ |
| b. Application Fee (62.11)        | Yes _____ | No _____ |

Failure to complete all sections of this application and submit required items under either #6 or #7 will be considered an incomplete application unless waived by the Planning and Zoning Administrator.

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Signature of Owner Date

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Signature of Applicant/Agent Date

**NOTE:** The Planning and Zoning Commission will hold a public hearing on this Application. The applicant, or authorized agent, must be present at the public hearing and should be prepared to present information showing how the proposed special use and the buildings, structures and facilities conform to the standards of the Regulations. All standards specified in Sections 42 and 43, as applicable, are in addition to other requirements of the Regulations applicable in the District in which the special use is to be located. The Commission is authorized by this Application to inspect the premises. The Commission may obtain information on its own initiative. It will rely upon data presented at the hearing. Applications may be approved by the Commission subject to conditions and safeguards deemed necessary to conserve the public health, safety, convenience, welfare and property values in the neighborhood.

**SAMPLE**

**SPECIAL USE NOTIFICATION LETTER**

The owner of the parcel of land known as \_\_\_\_\_  
has submitted an application to appear in front of the North Branford Planning and Zoning  
Commission at 6:30 p.m. on \_\_\_\_\_ at the North Branford Town Hall,  
909 Foxon Road, North Branford, Connecticut. In accordance with Section 42 Special Use  
Permits of the North Branford Zoning Regulations it has been determined that you own property,  
which falls within 500 feet of this location and are therefore being notified.

The applicant has requested the following:

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\_\_\_\_\_  
Property Owner's Name

\_\_\_\_\_  
Applicant's Name

Questions can be directed to the Building Department / Town Planner at  
(203) 484-6010