Address: _____ Zoning Permit # _____

Map: _____Lot: _____ Zone: _____ Expiration date: _____

Setbacks: Front/Rear: _____Sides: _____

Town of Montville Zoning Permit

Proposed Project: _____

Property Owner: _____

Applicant: _____

Applicant Address: _____

Phone #_____ Cell # _____

Email: _____

Provide the following:
Copy of plans drawn to scale of at least 1" = 40' ***showing****:* dimensions of lot, size and location of existing, proposed structures, driveways, sanitary facilities and water supply, parking facilities, and adjacent streets; distances of proposed structures from property lines and wetlands. (A copy of plan prepared by a Connecticut Registered Land Surveyor may be required).

The Owner/Agent is responsible for and agrees to:

1. Notify the Zoning Officer of any alteration in the plans.
2. An E&S cash bond of $2000 *may* be required and must be posted prior to approval of Zoning Permit. This bond may be held for up to one (1) year after Compliance Sign-off.
3. Prior to start of construction all E&S measures must be inspected by the Zoning Officer.
4. **Contact the Zoning Officer (860-848-6779) upon completion of project.**

I hereby certify that the information provided is true and correct and further attest the proposed project is authorized by the owner in fee and I am authorized to make application for a permit for such described work. The undersigned hereby authorizes the Montville Planning & Zoning Commission or its agents to enter the subject property for the purposes of inspection and/or enforcement.

Owner/Agent Signature: _____Date:_____

Applicant Signature: _____Date:_____

OFFICE USE ONLY **Fee: _____ Cash / Check # _____**

_____ _____ _____ _____
Commission Agent Date Certificate of Zoning Compliance (CZC) Date

☐ As Built required prior to issuance of CZC. Received on:_____

☐ Bond # & Date _____Released:_____
Site/Special Permit #_____
Wetlands Permit #_____
Conditions & Notes_____
_____
_____
_____
_____