



APPLICATION FOR ZONING APPROVAL & ZONING COMPLIANCE

Town of Wilton, Connecticut

This application shall be submitted along with the appropriate checklist and shall be accompanied by a survey and 1 set of architectural plans showing proposed construction where applicable.

ANY changes to the plans after initial approval must be reviewed and reapproved by Planning and Zoning.

Applicant to fill out upper portion only and sign.

Address of Property: _____ Date _____

Proposed Activity: _____

Owner _____ Tel. _____ Email _____

Owner's Mailing Address: _____

Owner's Email: _____

Agent/Contractor (If Applicable): _____ Tel. _____

Agent/Contractor's Email: _____

APPLICANT DECLARATION

I hereby represent the information provided in this application, including submitted plans and addendum documents, to be both true and accurate. With the issuance of this document the undersigned certifies that to the best of his/her knowledge and belief, the use or structure described above conforms with the Town of Wilton Zoning Regulations or is a valid non-conforming use under such Regulations.

I further understand that any modification, expansion or reduction in the scope of the project shall be subject to the issuance of a new or revised Zoning Permit prior to commencement of such work. I understand that the failure to fully disclose information or the failure to properly represent site conditions, whether existing or proposed, could result in the inability to obtain a Certificate of Zoning Compliance upon project completion.

Application is also being made for Zoning Certificate of Compliance. Upon completion of this project, the undersigned shall notify the Zoning Officer so that a final inspection can be made.

Applicant Signature (Print and Sign) _____

_____ Date

*****FOR OFFICE USE ONLY*****

ZONING INFORMATION AND APPROVALS

Zone _____ Parcel # _____ Lot Size _____ Zoning Permit # _____

Front Setback: _____ Rear Setback: _____ Left Setback: _____ Right Setback: _____

ZBA Variances Issued/Board Approval# _____

Notes _____

Approved By _____

_____ Date

Zoning Officer