

## **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 DI	ECLARATION	
true and accurate. With the issuance	of this document the unders	cluding submitted plans and addendum or igned certifies that to the best of his/her Wilton Zoning Regulations or is a valid no	knowledge and belief,
new or revised Zoning Permit prior t	o commencement of such wo conditions, whether existing	n in the scope of the project shall be subjork. I understand that the failure to fully or proposed, could result in the inability	disclose information or
Application is also being made for Zo	oning Certificate of Compliance	. Upon completion of this project, the unde	rsigned shall notify the
	Zoning Officer so that a find	al inspection can be made.	01
		ONLY ************************************	<u> </u>
Applicant Signature (Print and Sign) *************	**************************************	Date ' /	******
ZONING INFORMATION AND APPR			
Zone Parcel #	Lot Size	Zoning Permit #	
Front Setback: Rear Setk	oack: Left Setback	: Right Setback:	
ZBA Variances Issued/Board Appro	oval#		
Notes			
Approved By		Date	
Zoning Officer			