

PETITION TO AMEND THE ZONING MAP AND/OR REGULATIONS

Tax Collector _____

TOWN OF WESTBROOK ◆

Zoning Application # _____

Westbrook Land Use Department ◆ 866 Boston Post Road ◆ Westbrook, Connecticut 06498 ◆ (860)-399-3047 Fax (860)-399-2084

Application Type: [CHECK ONE OR MORE OF THE FOLLOWING]

Petition [CHECK ONE OF THE FOLLOWING]

- Zone Classification Change/Map Change
- Zoning Regulation-Text Amendment
- Floating Zone

Complete all of the following information on the subject property:

- ⇒ **Property Address/location of proposed activity:** (#/street) _____

- ⇒ Assessor's Map No. _____ ⇒ Lot No. _____ ⇒ Total Parcel Area (acres) _____
- ⇒ How many properties are being rezoned? _____
- ⇒ Current Zone District for each parcel? _____ Proposed Zone District(s)? _____
- ⇒ Flood Zone _____ Water Resource Area _____
- ⇒ Is the property within 500' of an adjoining municipality? **Yes** **No**
- ⇒ Required Referrals: *Abutting Town* *CRERPA* *Conservation Comm.* *Inland Wetlands* *Planning--*
 Was a report submitted to the Planning Commission describing how the proposed zone change is consistent with the Plan of Conservation & Development? _____ (Section 12.30.03)
- ⇒ See Reverse side for application submittal requirements.

***Applicant Name/Project Name:** _____

Address: (mailing) _____

Phone () _____ Cell/ _____ Fax () _____ E-mail _____



***Owner Name:** (if not applicant) _____ Phone () _____

Owner Address: (mailing) _____

Who will be representing this application? List the contact person for staff inquiries below.

Name: _____

Phone () _____ Cell/ _____ Fax () _____ E-mail _____

***This application is not valid unless owner signs on back of this form.**

