

- SUBDIVISION
- SPECIAL EXCEPTION
- ZONING BOARD OF APPEALS
- SITE PLAN REVIEW

S 2011-2

FILE # 00000000

Please fill out this application in pen only so we will know who you are, what you are applying to do, and how to contact you. With this basic information we will evaluate your project as it relates to City regulations as quickly as possible. Thank you for your cooperation.

GENERAL INFORMATION ABOUT THE PEOPLE INVOLVED

Date 6/25/2020
 Applicant: Philip Reynolds Phone # (315) 536-7240
 Address: 61 Old Orchard St City Williamsville State Ny Zip 14221
 Email: Phil and Holly 2 @ Gmail. Com Cell Phone # ()
 Agent: Frank Magnotta P.E. Phone # (860) 342-2191
 Address: 395 Main St City Portland State CT Zip 06480
 Email: FrankC.MagnottaPE@Aol.Com Cell Phone # ()

WHAT ARE YOU APPLYING TO DO? (CHECK ONE OR MORE)

- Add an addition to a single/two family dwelling to be used for _____
- Construct a single family dwelling (A-2 survey required)
- Add an addition to a multi-family or non-residential building to be used for (A-2 survey required) _____
- Convert an existing building from present use as _____ to a new use as _____
- Construct one or more new buildings to be used for (A-2 survey required) _____
- Subdivide land into building lots (A-2 survey required)
- Change the text of the Zoning Code or amend the Zoning Map
- Install a sign
- Start a Residential Unit Business Pursuit
- Application for Zoning Board of Appeals
- Extract Natural Resources like sand or gravel or fill an area
- Request for a G.S. 14-54 Location Approval (gen. repairer, used car or new car dealer)
- Other Final approval of lots 1-3

DEPT. PLANNING & ZONING
20 JUN 29 PM 3:17

FACTS ABOUT LAND PROPOSED FOR USE

Landowner: Philip Reynolds Living Trust Location: Coleman Road
 c/o Philip Reynolds Trust Name of Subdivision (if any): Cedar Ridge - Coleman Rd
 Zone R-30 Tax ID# 15517 Tax Assessor's Map 30 Lot 0296 309311
 Is this project within 500' of a Municipal Boundary? Yes _____ No
 Is this project located in a FEMA 100 or 500 year flood plain? Yes _____ No
 Utilities Available: City Water (); Private Well ; City Sewer (); Private Septic

DESIGN REVIEW BOARD STAFF*

x Philip Reynolds
SIGNATURE OF APPLICANT/AGENT**
 x Philip Reynolds
SIGNATURE OF OWNER**

DATE OF REVIEW/APPROVAL

- PERMIT NOT REQUIRED
- ADMINISTRATIVE APPROVAL
- IWWA REVIEW REQUESTED
- IWWA PERMIT REQUIRED

**Both signatures required. I certify that the above information and plans submitted are true and correct, and that, if required, an application for an Inland/Wetlands permit has been filed before or on the same day as the filing of this application with the P&Z Commission.

SIGNATURE OF IWWA STAFF

_____ Meets Zoning Requirements

*Signature by the Design Review Board Staff is required for all designs for exterior rehabilitation or new construction in the business zones.

ZONING ENFORCEMENT OFFICER
DATE OF APPROVED PLANS

Received \$ _____ by _____ check # _____

INITIAL APPLICATION FOR LAND USE

CITY OF MIDDLETOWN
Department of Planning, Conservation, and Development

<http://www.middletownplanning.com>

PO Box 1300
245 deKoven Drive
Middletown, CT 06457-1300
(860) 344-3425

Erosion & Sedimentation Control Compliance Agreement

I, (**PRINT NAME**) Philip Reynolds hereby agree that any tree cutting, land clearing, earth excavation, earth filling or any other construction activity associated with an approved permit at:

(**PROPERTY ADDRESS**) Cedar Ridge Subdivision - Coleman Rd

shall be in compliance with a approved plot/site plan as well and the City of Middletown Erosion & Sedimentation Control Guidelines.

I understand that failure to comply with the City of Middletown Erosion & Sedimentation Control Guidelines shall be deemed a violation and shall result in an enforcement action that may include a \$150 per day municipal citation fine and shall preclude zoning approval required for the issuance of a Certificate of Occupancy.

The City of Middletown reserves the right to implement corrective action for Erosion & Sedimentation Control violations, and in such cases will seek reimbursement for expenses related to any corrective action deemed necessary by the City.

Signed: Philip Reynolds
Date: 6/25/2020

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For Office Use Only

SPR# _____