



City of Middletown Department of Land Use

245 deKoven Drive
Middletown, CT 06457
(860)638-4590
www.MiddletownCT.gov

SITE PLAN APPLICATION

Category 2:

Category 3:

Category 4:

Location Information

Project Address: _____

Map: _____ Lot: _____ Parcel ID: _____ Zone: _____ Lot Area: _____

City Water: City Sewer: Private Well:* Private Septic:*

* Locations served by private well or septic may require a B-100a Septic approval from the Department of Health.

Applicant Information

Name: _____ Firm Name: _____

Street Address: _____ City: _____ ST: _____ Zip: _____

Email: _____ Phone: _____

Signature: _____ Date: _____

Property Owner(s) Information

Same as Applicant:

Name: _____ Principal: _____

Street Address: _____ City: _____ ST: _____ Zip: _____

Email: _____ Phone: _____

Signature[†]: _____ Date: _____

Description of Project: _____

If more space is needed, then please provide separate narrative document.

[†] Authorizing the applicant to apply on the owner's behalf and authorizing any town official and/or employee that the town deems necessary may enter the property to verify information submitted with this application.

To be completed by Land Use Staff only:

Fee Paid \$ _____ Check # _____

Received by: _____

Application # _____

To be completed by Land Use Staff only:

- Property is within 500 feet of a municipal boundary of: _____
- Construction in Flood Hazard Area: Zone-BFE: _____
- Property is Nonconforming with respect to: _____
- Aquifer Protection Area: YES NO
- Potential impacts to a wetland/watercourse: YES NO Agent Signature: _____

Required Approvals

- Inland Wetlands and Watercourses Agency review needed: Application # _____
- Design Review and Preservation Board review needed: Application # _____
- Amendment to Zoning Code/Zoning Map – Application # _____
- Zoning Board of Appeals review needed: Application # _____
- Other: _____

Requested Comments

- City Department request for comment: _____

- Outside City Agency review required: _____

Completed by: _____ Date: _____

Decisions:

Application # _____

Approved Approved w/Conditions Denied

Approved Plan Date: _____

Director of Land Use/ Designee

Date

Staff Notes and Conditions:
