



City of Middletown Department of Land Use

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

VARIANCE APPLICATION

Location Information

Project Address: _____

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

Owner's Deed Reference: Book: _____ Page(s): _____ Recorded Date: _____

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: _____

Seeking Variance of Section(s) of the Zoning Code: _____

Description of Project: _____

Hardship Claimed: _____

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 # _____