

DANVILLE ZONING APPLICATION

FOR ADMINISTRATIVE USE ONLY

APPLICATION# 2024-63 DATE RECEIVED: 10/1/24 FEE PAID: \$135 Cash

DO NOT WRITE ABOVE THIS LINE:

Step 1: TYPE OF PERMIT REQUESTED AND FEE

*Needs to go before Development Review Board

- PERMITTED USE (\$35) SUBDIVISION (\$65) * DESIGN CONTROL (\$65) *
 CONDITIONAL USE (\$65)* VARIANCE (\$65) * WAIVER (\$65) *

Step 2: ZONING DISTRICT (choose one)

- MEDIUM DENSITY RESIDENTIAL 1 MEDIUM DENSITY RESIDENTIAL 2 VILLAGE RESIDENTIAL
 LOW DENSITY RESIDENTIAL DESIGN CONTROL OVERLAY HISTORIC NEIGHBORHOODS
 DEVELOPED SHORELAND OVERLAY ROUTE 2 CONSERVATION VILLAGE CORE

Step 3: APPLICANT/PROPERTY OWNER: (PLEASE PRINT – if more than one PROPERTY OWNER a separate sheet can be attached)

APPLICANT NAME(S): ROBERT RORABACK
APPLICANT'S MAILING ADDRESS: 729 WEST RD. SALEM CT 06420
CONTACT NUMBER: 860 883 2445 EMAIL: DNRORABACK@COMCAST.NET

Property Owner Name(s) MUST be the same as recorded on deed. If more than one, separate sheet can be added.

PROPERTY OWNER NAME(S): ROBERT RORABACK
PROPERTY OWNER'S MAILING ADDRESS: _____
CONTACT NUMBER: _____ EMAIL: _____

Step 4: PHYSICAL LOCATION OF PROJECT PROPERTY (911 ADDRESS):

Parcel ID# TH044-018.000 DEED: BOOK# 164 PAGE# 505

IS PROPERTY ON TOWN WATER AND/OR SEWER? YES NO

Step 5: DESCRIPTION OF PROJECT AND ESTIMATED DATE OF COMPLETION

4X10 ADDITION TO EXISTING CARAV

Step 6: LOT SIZE & SETBACKS: (Distance from new construction and lot lines)

LOT SIZE: 31 (ACRES) LOT WIDTH: 1000

FRONT: 1200 FT. SETBACKS REAR: 1000 FT.
(from center of road)

RIGHT SIDE: 300 FT. LEFT SIDE: 300 FT.

Step 7: PLEASE ATTACH ONE COPY OF ALL SITE AND PLOT PLANS

- Copy must include: Site & design of building
- Height of building and landscaping design
- If in Design Control Overlay District: exterior design & exterior materials used

Step 8: ADJOINING LAND OWNER INFORMATION. Provide NAME of ALL adjoining landowners. ONLY required if going to a DRB Hearing (Conditional Use, Variance, Subdivision, Waiver, and Design Control Applications)

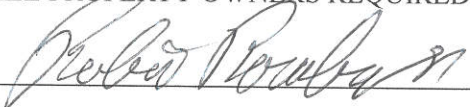
NAME _____

Step 9: SIGNATURE

By signing below, I/We hereby certify that, to the best of my/our knowledge, all of the above is a true representation of the facts related to this proposed project. I/We also hereby request a Hearing before the Development Review Board if application is for a Conditional Use, Variance, Subdivision or Design Control.

Applicant _____ Date: _____

SIGNATURE OF ALL PROPERTY OWNERS REQUIRED (If additional lines required, a separate piece of paper can be added)

Property Owner  Date: 10/1/2024

FOR ADMINISTRATIVE USE ONLY

ZONING ADMINISTRATIVE OFFICER ACTION:

APPROVED DENIED REFERRED TO DRB (DEVELOPMENT REVIEW BOARD)

*Note: All applications for CONDITIONAL USE, DESIGN CONTROL, SUBDIVISION, WAIVER and VARIANCE will automatically be DENIED pending a decision by the DRB at a hearing.

ADMINISTRATIVE OFFICER'S SIGNATURE _____ DATE _____

DATE OF APPROVAL OR DENIAL BY DEVELOPMENT REVIEW BOARD: _____

DATE POSTED: _____ DATE WARNED: _____

HEARING DATE: _____ FINAL APPEAL DATE: _____