

ZONING REFERRAL FORM



FOR: NOTIFICATION OF REFERRALS BY ZONING COMMISSIONS	
Please fill in, save a copy for your records and send with appropriate attachments by certified mail or electronically to: zoningref@crcog.org	
FROM: <input checked="" type="checkbox"/> Zoning Commission <input type="checkbox"/> Planning and Zoning Commission <input type="checkbox"/> City or Town Council (acting as Zoning Commission)	Municipality: Simsbury
TO: Capitol Region Council of Governments Policy Development & Planning Department 241 Main Street Hartford, CT 06106	Date of Referral: 01/20/2022
Pursuant to the provisions of Section 8-3b of the General Statutes of Connecticut, as amended, the following proposed zoning amendment is referred to the Capitol Region Council of Governments for comment:	
NATURE OF PROPOSED CHANGE:	
<input type="checkbox"/> Adoption of amendment of ZONING MAP for any area within 500 feet of another Capitol Region Municipality. Attach map showing proposed change.	<input checked="" type="checkbox"/> Adoption or amendment of ZONING REGULATIONS applying to any zone within 500 feet of another Capitol Region Municipality. Attach copy of proposed change in regulations.
THE CHANGE WAS REQUESTED BY: <input checked="" type="checkbox"/> Municipal Agency: Town of Simsbury <input type="checkbox"/> Petition	
DATE PUBLIC HEARING IS SCHEDULED FOR: 02/07/2022	
MATERIAL SUBMITTED HEREWITH:	
<input checked="" type="checkbox"/> Regulation Changes	<input type="checkbox"/> Map of Change
<input type="checkbox"/> Public Notice	<input type="checkbox"/> Supporting Statements
<input type="checkbox"/> Other (Specify):	
HAS THIS REFERRAL BEEN SUBMITTED PREVIOUSLY TO CRCOG? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, ON WHAT DATE:	
(FOR USE BY CRCOG)	Name:
Date Received:	Title:
Sent certified/e-mail?	Address:
File Number	Phone:
	Email:

BY LAW, THE ZONING COMMISSION SHALL GIVE WRITTEN NOTICE OF ITS PROPOSAL TO THE REGIONAL COUNCIL OF GOVERNMENTS NOT LATER THAN THIRTY DAYS BEFORE THE PUBLIC HEARING TO BE HELD IN RELATION TO THE SUBJECT SUBDIVISION. NOTICE SHALL BE MADE BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED OR BY EMAIL TO zoningref@crcog.org.

CRCOG-2017

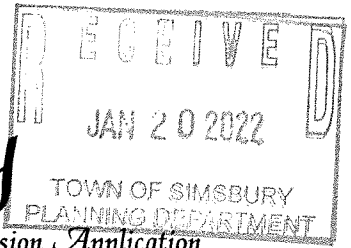
Andover / Avon / Berlin / Bloomfield / Bolton / Canton / Columbia / Coventry / East Granby / East Hartford / East Windsor / Ellington / Enfield / Farmington / Glastonbury / Granby / Hartford / Hebron / Manchester / Mansfield / Marlborough / New Britain / Newington / Plainville / Rocky Hill / Simsbury / Somers / South Windsor / Southington / Stafford / Suffield / Tolland / Vernon / West Hartford / Wethersfield / Willington / Windsor / Windsor Locks

A voluntary Council of Governments formed to initiate and implement regional programs of benefit to the towns and the region



Town of Simsbury

Office of Community Planning and Development - Zoning Commission Application



DATE: 1/20/2022 FEE: \$ N/A CK #: _____ APP #: 22-04

PROPERTY ADDRESS: _____

NAME OF OWNER: Simsbury Zoning Commission

MAILING ADDRESS: _____

EMAIL ADDRESS: _____ TELEPHONE # _____

NAME OF AGENT: Laura Barkowski, Code Compliance Officer

MAILING ADDRESS: 933 Hopmeadow Street

EMAIL ADDRESS: lbarkowski@simsbury-ct.gov TELEPHONE # 860-658-3228

ZONING DISTRICT: N/A LOT AREA: N/A SQ FT/ACRES _____

Does this site have wetlands? YES NO Have you applied for a wetlands permit? YES NO

REQUESTED ACTION (PLEASE CHECK APPROPRIATE BOX):

ZONE CHANGE: The applicant hereby requests that said premises be changed from zone _____ to zone _____.

TEXT AMENDMENT: Please attach proposed changes, including Articles and Sections, and purposes.

SPECIAL EXCEPTION: The applicant hereby requests a public hearing pursuant to Article _____, Section _____.

SITE PLAN APPROVAL: The applicant hereby requests
 PRELIMINARY FINAL SITE PLAN AMENDMENT pursuant to Article 5, Section J

SIGN PERMIT

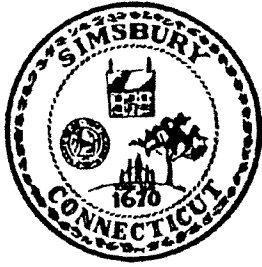
OTHER (PLEASE EXPLAIN): _____

Text amendment to Section 4.5 of the Zoning Regulations. Amendment is for the addition of medical offices and clinics as a use in the regulations per submitted.

NOTE: Each application must fully comply with the requirements of the Zoning Regulations prior to receipt by the Commission. Each application for zone change and/or special exception shall include a list of names and addresses of abutting property owners and all property owners within 100 feet of the subject site.

A check payable to the Town of Simsbury must accompany this **original signed and dated** application. **Six (6) complete (folded) sets of plans and eleven (11) copies of the completed application and correspondence** must also be included. If you have a PDF of your plans, we would appreciate a copy of that sent to lbarkowski@simsbury-ct.gov, as well.

Signature of Owner Date Signature of Agent Laura Barkowski Date 1/20/22



Town of Simsbury

933 HOPMEADOW STREET

P.O. BOX 495

SIMSBURY, CONNECTICUT 06070

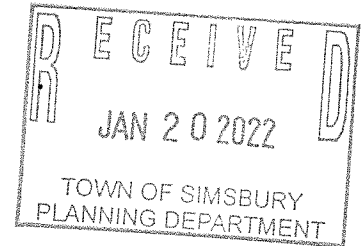
Office of Community Planning and Development

TO: Zoning Commission

FROM: Laura Barkowski
Code Compliance Officer

DATE: 1/19/2022

SUBJECT: Text Amendment – Medical Office/Clinic Use



Staff prepared modifications to the existing regulations with Blue/Underlined text is to be added to the regulations.

The proposed change is to add the use of Medical Office and Clinic by Site Plan in each Business Zoning District. No additions are currently proposed to definitions. This use is currently allowed in the Industrial Districts by Site Plan. Below please find the entire use chart for comparison to what is currently allowed within the Business Districts.

4.5 PERMITTED AND SPECIAL PERMIT USES

SP- Site Plan, SE- Special Exception, NO- Not allowed

Business Permitted Uses	B-1	B-2	B-3	PO
Professional Office uses	SP	SP	SP	SP
Bank	SP	SP	SP	SP
Studio	SP	SP	SP	NO
Retail stores, and personal service shops not involving manufacture of products except those sold at retail on the premises and provided further that no more than five (5) operators shall be employed in the manufacturing process, but not including gasoline service stations, automobile sales, repairs, storage, and car washes.	SP	SP	SP	NO
Restaurants with or without liquor, beer or wine licenses	SE	SE	SE	NO
Taverns	SE	SE	SE	NO
Specialty, limited menu, sandwich, or other eating place with or without curbside service	SE	SE	SE	NO
Convenience stores selling food items	SE	SE	SE	NO
Commercial parking lot available to the public for or as an accommodation to clients or customers.	SP	SP	SP	NO
Markets, supermarkets and specialty food stores	SE	SE	SE	NO
Outside storage in connection with the operation of a business (Adopted April 15, 1996)	SE	SE	SE	NO

Business Permitted Uses

	B-1	B-2	B-3	PO
Automobile sales, repair, and storage	NO	SE	SP	NO
Automobile service stations	NO	SE	SP	NO
Car washes- where car washes are included as any part of an application, a report from a professional engineer on the disposal and impact of wastewater and cleaning products must be included with the application.	NO	SE	SP	NO
Sales and storage of contractor's equipment	NO	SE	SP	NO
Veterinary hospitals and commercial kennels	NO	SE	SP	NO
Theaters, except drive ins	NO	SE	SP	NO
Church, School, Library	SE	SE	SE	SE
Assisted living facility, Congregate Senior Housing Facility and/or Continuing Care Retirement Community with accessory uses	SE	SE	SE	NO
<u>Medical Offices and Clinics</u>	<u>SP</u>	<u>SP</u>	<u>SP</u>	<u>SP</u>