



Town of Simsbury

933 HOPMEADOW STREET

SIMSBURY, CONNECTICUT 06070

Office of Community Planning and Development

ZONING COMPLIANCE REVIEW- \$25.00 # _____ - _____

Applicant Name: Poyant Signs / Christopher Ramm		Property Owner: Simsbury Turnpike Realty		
Property Address: 25 Albany Turnpike				
Contact Info (phone, email): 774-762-3413 cramm@poyantsigns.com				
Permit Mailing Address: 125 Samuel Barnet Blvd., New Bedford MA 02745				
Proposed Structure: Signs/Canopies	Sq. Ft. 22.75	Length: 11' 4.5"	Width: 5"	Height: 2'
Proposed Use: Fast Food		Existing Use: Same		
Zoning District: B-3	Variance: Yes/No NO	Parcel Size: 8.47 Acres		
Flood Zone: No	Wetlands: Yes/No NO	If yes, approval date:		
1st Floor Area: _____ sq. ft.	2nd Floor Area: _____ sq. ft.	Historic District: Yes/No NO		
Special Exception: Yes/No: Describe: NO				
Comm/Industrial/Business Structures: Coverage: Existing % _____ Proposed % _____				
Please provide: 1. A copy of a map or site plan, drawn to scale, to include the following: <ul style="list-style-type: none"> • Location and exact dimensions of all boundaries of the lot; • Location of wetlands and watercourses on or near property; • Location and exact dimensions of all existing and proposed structures, septic system and water supply; • Exact distance of proposed structures from property lines; • A floor plan if the application is for a commercial change of use. 2. Staff may require additional information based on the type of permit required.				
<u>REQUIRED ZONING INSPECTIONS- OFFICE USE ONLY</u>				
<input type="checkbox"/> E&S compliance <input type="checkbox"/> Foundation As Built <input type="checkbox"/> Final As- Built <input type="checkbox"/> Certificate of Occupancy <input type="checkbox"/> Site Plan <input type="checkbox"/> Compliance <input type="checkbox"/> Limits of Clearing <input type="checkbox"/> Final Zoning Compliance				

APPROVED: _____ **Date:** _____ **DENIED:** _____ **Date:** _____

FOR OFFICE USE ONLY

CERTIFICATE OF OCCUPANCY SIGN OFF

A request has been made for Certificate of Occupancy for a, _____ (structure), at, _____ (address), Building Permit # _____.

Departments	Signature/Sign off	Date
Health Dept/FVHD		
Sewer- Public		
Fire Marshal		
Zoning/ZBA		
Wetlands		
HDC		
Engineering		
Comments		