



Town of Simsbury

Office of Community Planning and Development - Zoning Commission Application

DATE: 04/08/2021 FEE: \$ _____ CK #: _____ APP #: _____

PROPERTY ADDRESS: 933 & 939 Hopmeadow Street

NAME OF OWNER: Maria E. Capriola - Town of Simsbury

MAILING ADDRESS: 933 Hopmeadow Street, Simsbury, CT 06070

EMAIL ADDRESS: mcapriola@simsbury-ct.gov TELEPHONE # 860 658 3230

NAME OF AGENT: Town of Simsbury - Engineering Department

MAILING ADDRESS: 933 Hopmeadow Street, Simsbury, CT 06070

EMAIL ADDRESS: dgannon@simsbury-ct.gov TELEPHONE # 860 658 3260

ZONING DISTRICT: SCZ LOT AREA: 4.07 ACRES 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):** _____

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.

Maria Capriola 4/1/21 [Signature] 04/01/2021
 Signature of Owner Date Signature of Agent Date