



# Town of Simsbury



Office of Community Planning and Development - Zoning Commission Application

DATE: 4-25-22 FEE: \$ 96.60 CK #: 72453 APP #: 22-16

PROPERTY ADDRESS: 522 Hopmeadow Street

NAME OF OWNER: AMJ 524 LLC

MAILING ADDRESS: 540 Hopmeadow Street, Simsbury, CT 06070

EMAIL ADDRESS: \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

NAME OF AGENT: ARTfx

MAILING ADDRESS: 27 Britton Drive, Bloomfield, CT 06002

EMAIL ADDRESS: skessing@artfxsigns.com TELEPHONE # 860-242-0031

ZONING DISTRICT: B-2 LOT AREA: 1.23 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](mailto:lbarkowski@simsbury-ct.gov), as well.

SEE ATTACHED CONSENT  
Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

Signature of Agent \_\_\_\_\_ Date 4/25/22

