

Town of Simsbury

Office of Community Planning and Development – Zoning Commission Application

DATE:	10/3/2023	FEE: <u>\$</u>		CK #:	APP#: 23-38
PROPE	RTY ADDRESS	: 200 Hopmead	dow Street, Simsbury,	CT	
NAME OF OWNER: SL Simsbury LLC					
			Road Basking Ridge	, NJ 07920	
EMAIL ADDRESS: holdensabato@silvermangroup.net					
		olden Sabato			
MAILING ADDRESS: 195 Morristown Road Basking Ridge, NJ 07920					
	G DISTRICT: _			LOT AR	PHONE # (973)765-0100 x4083 EA: 124.64 AC SQ FT/ACRES
Does th	is site have wetl	ands? YES	□NO Have yo		lands permit? TYES NO
REQUESTED ACTION (PLEASE CHECK APPROPRIATE BOX):					
	SPECIAL EXC SITE PLAN AI	OMENT: Please attac CEPTION: The applic PPROVAL: The appl PRELIMINARY	h proposed changes, including cant hereby requests a public he icant hereby requests FINAL SIT	Articles and Sections caring pursuant to Ar E PLAN AMENDA	to zone s, and purposes. ticle, Section IENT pursuant to Article 5, Section J er HS-FBC Section 5.0.B.4
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.					
√ ✓ Signatu	re of Owner	Date		re of Agent	Date
т,,	(000) 000 0	10.45			

Telephone (860) 658-3245 Facsimile (860) 658-3206

www.simsbury-ct.gov

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