



PETITION TO THE ZONING COMMISSION  
TOWN OF STRATFORD, CONN.

DATE \_\_\_\_\_

1. NAME OF PETITIONER \_\_\_\_\_
2. Mailing Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_
3. Petitioner's Interest In Property (Owner, Lessee, etc.) \_\_\_\_\_
4. If any previous petition has been filed for this property, give date of hearing and the manner in which this petition may differ. \_\_\_\_\_

NOTE: READ CAREFULLY BEFORE FILLING OUT THIS PETITION

Petition must be typed or printed. Date fee is paid shall be date of receipt of petition. Twelve copies of all required plans must accompany and be a part of this petition. The plans, drawn to scale, shall show size of lot, buildings, and other data to clearly present pertinent information.

The undersigned respectfully presents the following petition for (check one)

CHANGE OF ZONE       APPROVAL OF LIQUOR LOCATION

under the Zoning Regulations of the Town of Stratford on property located at:

Number	Street	Lot #	Map
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This property is located in an \_\_\_\_\_ Zoning District and is bounded as follows:

NORTHERLY BY \_\_\_\_\_ FT. M/L  
 EASTERLY BY \_\_\_\_\_ FT. M/L  
 SOUTHERLY BY \_\_\_\_\_ FT. M/L  
 WESTERLY BY \_\_\_\_\_ FT. M/L

Check here is property is located within 500 feet of adjoining town line.

Answer the following two questions if petition is for a CHANGE OF ZONE

1. Zone requested is to be changed from \_\_\_\_\_ District to \_\_\_\_\_ District.
2. Zone change is requested because \_\_\_\_\_  
\_\_\_\_\_

Answer the following three questions if this petition is for APPROVAL OF LIQUOR LOCATION.

1. Approval of this location is requested for a \_\_\_\_\_ permit.  
(State class or type of permit).
2. Distance of location from:
  - a) Residential district \_\_\_\_\_ feet
  - b) Another location of the same class \_\_\_\_\_ feet
3. Reason for requesting approval \_\_\_\_\_  
\_\_\_\_\_

PRINT NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_  
ADDRESS \_\_\_\_\_

If application is signed by other than the owner, a statement of authorization by the owner shall accompany this petition.

I AM AWARE OF THE REQUIREMENT FOR NOTIFICATION OF NEIGHBORING PROPERTY OWNERS PURSUANT TO THE ATTACHED INSTRUCTIONS (Must check)  
PLEASE MAKE CHECK PAYABLE TO THE STRATFORD ZONING COMMISSION

**CHANGE OF ZONE    \$660.00            APPROVAL OF LIQUOR LOCATION    \$350.00**

\$ \_\_\_\_\_ FEE RECEIPT # \_\_\_\_\_ DATE \_\_\_\_\_ CLERK \_\_\_\_\_

PLOT PLANS SHALL BE PREPARED BY A REGISTERED LAND SURVEYOR AND CERTIFIED THEREON.

**ZONE CHANGE**

As of October 22, 1981, the Planning and Zoning Commission requires that all plot plans submitted with Zone Change Applications conform to the following list. Plans will not be accepted unless these items are checked.

- 1. Lot area (including and excluding wetlands) \_\_\_\_\_
- 2. Areas tabulated \_\_\_\_\_
- 3. Adjoining property owners \_\_\_\_\_
- 4. Adjoining zone designations \_\_\_\_\_
- 5. All buildings and their location \_\_\_\_\_
- 6. Parking areas \_\_\_\_\_
- 7. Driveways and all other impervious surfaces \_\_\_\_\_
- 8. Amount and location of all wetlands, waterbodies, watercourses,  
coastal bluffs/ escarpments & beaches/dunes \_\_\_\_\_
- 9. Easements \_\_\_\_\_
- 10. Contours where applicable \_\_\_\_\_
- 11. Any other pertinent information to aid the Commission in their decision. \_\_\_\_\_

CLASS A-2 SURVEY REQUIRED

LETTER OF AUTHORIZATION FROM OWNER IS REQUIRED

In reviewing this site plan, the Commission has relied upon information provided by the applicant, and, if such information subsequently proves to be false, incomplete, and/or inaccurate, any approvals given may be modified, suspended, and/or revoked.

I certify that the above items are shown on the proposed plans submitted.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**SITE VISITS**

After the submission of this application, The Zoning Commission members and / or staff may decide to carry out informal, independent site visits to the subject property. These visits would take place prior to the Public Hearing at which the application is scheduled.

We thank you for your cooperation.

Please feel free to contact the Planning and Zoning Office if you have any questions or there are any special circumstances , which might affect site visits.

**LIQUOR LOCATION**

As of October 22, 1981, the Planning and Zoning Commission requires that all plot plans submitted with Liquor Location Applications conform to the following list. Plans will not be accepted unless these items are checked.

- 1. Lot area (including and excluding wetlands) \_\_\_\_\_
- 2. Zone designation of properties \_\_\_\_\_
- 3. Zone designation of adjoining properties. \_\_\_\_\_
- 4. All buildings on property and their uses. \_\_\_\_\_
- 5. Parking areas \_\_\_\_\_
- 6. Driveways and all other impervious surfaces \_\_\_\_\_
- 7. Floor plan of proposed location \_\_\_\_\_
- 8. Nearest location, measured as per 15.2, of same class of permit \_\_\_\_\_
- 9. Nearest churches and distance \_\_\_\_\_
- 10. Nearest schools and distance \_\_\_\_\_
- 11. Nearest public playgrounds and distance \_\_\_\_\_
- 12. Nearest residential district \_\_\_\_\_

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ZONING COMMISSION

TOWN OF STRATFORD

Instructions to the Applicant for Notification of Affected and Neighboring Property Owners

1. On Application for a change of zone, letters must be sent to each property owner within the proposed zone change and to each adjoining property owner and those directly across the street explaining the requested petition (see sample letter below). On applications for approval of liquor location, letters must be sent to each adjoining property owner and those directly across the street. Names of neighboring property owners may be found in the Assessor's Office.
2. Certificates of Mailing must be obtained from the U.S. Post Office for each letter and presented to the Zoning Commission.
3. These letters must be mailed no later than fourteen (14) days prior to the public hearing date.
4. Sign this form below and present to the Commission at the public hearing along with the Certificates of Mailing.

SAMPLE LETTER

TO WHOM IT MAY CONCERN:

I have petitioned the Zoning Commission for approval to

\_\_\_\_\_

located at \_\_\_\_\_ in a \_\_\_\_\_ District.

Copies of the plans are on file in the Planning and Zoning Office, Room 113, Town Hall, Stratford,

This application will be heard on Tuesday evening \_\_\_\_\_ at 7:00 P.M. in the Council Chamber, Town Hall.

Very truly yours,

\_\_\_\_\_

Signed

The undersigned has complied with the Zoning Commission requirement of notification of neighboring property owners of the property on which the petition has been requested, as outlined in the instructions to the applicant.. Certificates of such mailing are attached hereto.

Signed \_\_\_\_\_