



PLANNING AND ZONING COMMISSION

225 Center Road - Easton, Connecticut 06612

Telephone: (203) 268-6291

ZONING PERMIT APPLICATION

- Aspetuck Health Dept. approval with approved site plan required with submission
➤ Site Plan* (3 copies) showing proposed location
➤ Floor Plans/Elevations (3 copies) as required to show compliance with Regulations (i.e. Area, Height, etc.)
➤ Drainage Report (2 copies) as required
➤ Completed Inland Wetland Determination Form
➤ If applicable, a Driveway Permit from DPW
➤ Letter of Authorization if Applicant is not Owner
➤ Application MUST be complete in its entirety
➤ Check to the "Town of Easton" w/address in memo

Office Use Only
Date Submitted: _____
Application #: _____
Zoning Permit Fee*: \$ _____
* \$1.50 per \$1,000 of Construction (\$25 min.)
State Land Use Fee: + \$ 60.00
CZC Inspection Fee: + \$ 25.00
Total Fee Due: \$ _____

* Improvement Location Survey by a surveyor licensed in the State of Connecticut; this requirement may be waived if an as-built survey is on file and it can be clearly established and verifiable in the field, to the satisfaction of the Zoning Enforcement Officer, that the proposed work will not be within the setback area

Property Owner: _____ Phone: _____

Applicant (if different): _____ Phone: _____

Property Address: _____

Map No./Subdivision: _____ Vol./Pg.: _____ Variance Vol./Pg.: _____

Zoning District: [] A (R1) [] B (R3) Lot Size: _____ Sq. Ft. / Acres

Type of Construction: [] New [] Alteration [] Addition [] Renovation [] Conversion

Type of Structure/Use: [] Residential [] Accessory [] ADU* [] Pool [] Other

Description of Project: _____

Proposed Setbacks to Structure: Front - _____ ft; Sides - _____ ft/ _____ ft; Rear - _____ ft

Is activity in the 100 Year Flood Plain: [] Yes [] No

*An Accessory Dwelling Unit (ADU) must include the ADU Addendum and Owner Affidavit.

Estimated Construction Cost: Structure Cost \$ _____ (Same cost on Building Permit)

Mechanical Cost \$ _____ (Sum of all Mechanical Permits)

Cost of Other Improvements \$ _____ (i.e. sitework, driveway, etc.)

TOTAL CONSTRUCTION COST \$ _____ (sum of above costs)

I, the undersigned, hereby consent to necessary and proper inspection of the subject premises by a representative of the Planning and Zoning Commission, at reasonable times, both before and after any permit applied for has been granted by the agency. Further, I hereby certify that the above answers are correct and true and that I shall conform to the requirements of the Easton Zoning Regulation.

Owner Signature: _____ DATE _____ Print Name: _____

Applicant Signature: _____ DATE _____ Print Name: _____