

## ZONING REVIEW - DRIVEWAY Town of Windsor Locks

Offic	e Use Only		and the state of t		Fee: \$20.00
Permi	t Number:	Approved:	Disapproved:	Date:	
Zonin,	g Official Signature:				
			quired information is pro with design, health and p		quire review by other
Proje	ct Site Address:				Windsor Locks
Contractor / Company Name:					
Applicant Address (if different)					
Applicant Email:Applicant PH:					
Contractor License Number:PH:					
Type of Occupancy: Residential Commercial Industrial					
Гуре of Project (Check all that apply.):					
Reconstruct or Resurface of Existing Driveway only (no expansion) New Driveway					
Expand Existing Driveway If expanding, what is the expansion area (sq. ft.)?					
	1. I have submitted a plot plan showing the dimensions of the property, the location and dimensions of the proposed construction or expansion, and the distances from the proposed construction or expansion to				
2.	the property lines.  I understand that the requirements for locating and constructing driveways can be found in Section 225 and Appendix B Sketch 8 of the Windsor Locks Zoning Regulations, which are available at				
3.	www.windsorlocksct.org or by calling the Land Use Office at 860 627 1447.  I hereby agree to conform to all the requirements of the Zoning Regulations of the Town of Windsor Locks and the Laws of the State of Connecticut and to notify the Zoning Official of any alteration in the				
4.	specifications of the improvements indicated as part of this permit application.  I understand that a Right of Way permit through the Department of Public works may also be necessary for this project. The Department of Public Works phone number is 860 627 1405.				

Applicant Signature Updated May 31, 2018