TOWN OF SOUTH WINDSOR PLANNING & ZONING COMMISSION APPLICATION FORM

APPLICATION FORM
Application Number:
Official Receipt Date:
Munis Application #:
NOR-CO
APPLICANT: Distinctive Tree Care
PROJECT NAME: Distinctive Tree Care
COMPLETE LOCATION OF PROPERTY: 591 and 595 Nutmeg Road North
OWNER OF RECORD ON LAND RECORDS: Nutmeg Road North 591 LLC and Nutmeg Road North 595 LLC
OWNER ADDRESS: 48 Patria Road, South Windsor, CT 06074
GIS PIN # 65100591 & 65100595 ZONE
NAME, ADDRESS, TELEPHONE & EMAIL ADDRESS OF PERSON TO WHOM INQUIRIES SHOULD BE DIRECTED: Daniel Jameson, Design Professionals, Inc., 21 Jeffrey Drive, South Windsor CT
(860) 291-8755; djameson@designprofessionalsinc.comEstimated presentation time:
THIS APPLICATION IS FOR: (Check all that apply):
Zone Change to (Public Hearing and Certificate of Mailing Required)
Open Space Subdivision/Resubdivision (Public Hearing and Certificate of Mailing Required)
☐ Subdivision ☐ Minor ☐ Major
☐ Resubdivision (Public Hearing Required) ☐ Minor ☐ Major
☐ Conditional Subdivision
Special Exception to Table (Public Hearing and Certificate of Mailing Required)
✓ Site Plan of Development New ✓ Modification Building(s) Sq Ft 4,621 SF and 7,200 SF
General Plan of Development
☐ Earth Filling (Sec. 7.6) and/or Earth Removal (Sec. 7.16) (Public Hearing and Certificate of Mailing Required)
☐ Regulation Amendment ☐ Zoning ☐ Subdivision - Attach proposed amendment (Public Hearing Required)
Temporary and Conditional Permit (Public Hearing Required) for
☐ Temporary and Conditional Permit Renewal for
☐ Detached In Law Apartment or ☐ Accessory Apartment (Public Hearing and Certificate of Mailing Required)

PLEASE NOTE: An Application Pending Sign is required to be posted on the property for all applications ten (10) days prior to being heard by the Commission.

Simulation of August

Other (explain in detail)

cant Signature of Property Owner

Print Name of Applicant Print Name of Property Owner

☐ Major Home Occupation (Certificate of Mailing Required) for ___

Revised 1/9/2017