

**TOWN OF SOUTH WINDSOR
PLANNING & ZONING COMMISSION
APPLICATION FORM**



Application Number: _____
Official Receipt Date: _____
Munis Application #: _____

APPLICANT: Town of South Windsor

PROJECT NAME: Pleasant Valley Elementary School

COMPLETE LOCATION OF PROPERTY: 591, 623, & 647 Ellington Road (Building address to remain 591 Ellington Road)

OWNER OF RECORD ON LAND RECORDS: Town of South Windsor

OWNER ADDRESS: 1540 Sullivan Avenue, South Windsor, CT 06074

GIS PIN # 30300591, 30300623, & 30300647 ZONE RR

NAME, ADDRESS, TELEPHONE & EMAIL ADDRESS OF PERSON TO WHOM INQUIRIES SHOULD BE DIRECTED:
Benjamin Wheeler, Design Professionals, Inc., 21 Jeffrey Drive, South Windsor CT

(860) 291-8755; bwheeler@dpinc.co

Estimated presentation time: 30 min

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 3.1.1A (Public Hearing and Certificate of Mailing Required)
- ☒ Site Plan of Development ☐ New ☒ Modification Building(s) Sq Ft 102,150 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)
- ☐ Major Home Occupation (Certificate of Mailing Required) for _____
- ☐ Other (explain in detail) _____

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.

[Signature]
Signature of Applicant
Town of South Windsor, care of Mr. Michael Maniscalco

Print Name of Applicant

[Signature]
Signature of Property Owner
Town of South Windsor, care of Mr. Michael Maniscalco

Print Name of Property Owner

Revised 1/9/2017