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

The second secon	APPLICATION FORM	
Application Number:		
Official Receipt Date:		
Munis Application #:		
APPLICANT: Town of South Winds	or	
PROJECT NAME: Emergency Services T	elecommunications Tower	
COMPLETE LOCATION OF PROPERTY:	124 Sullivan Avenue	
OWNER OF RECORD ON LAND RECOR	DS:Town of South Windsor	
OWNER ADDRESS: 1540 Sullivan Avenue	South Windsor, CT 060)74
GIS PIN #87300124	ZONE RC	
NAME, ADDRESS, TELEPHONE & EMA	L ADDRESS OF PERSON TO W	HOM INQUIRIES SHOULD BE DIRECTED:
Peter R. DeMallie Design Professiona	s, Inc. 21 Jeffrey Drive	South Windsor, CT 06074
860-291-8755 pdemallie@dpinc.c	0	Estimated presentation time: 10 min.
THIS APPLICATION IS FOR: (Check all	hat apply):	
Zone Change to	(Public Hearing and Certific	ate of Mailing Required)
☐ Open Space Subdivision/Resubdivis		-
☐ Subdivision	☐ Minor ☐ Major	,,,,,,
Resubdivision (Public Hearing Required) Minor Major		
☐ Conditional Subdivision		
Special Exception to Table 7.18	(Public Hearing and Certific	nate of Mailing Required
✓ Site Plan of Development New		
	Modification Build	ing(s) Sq Ft
General Plan of Development Dept of Motor Vehicle License State	Hanning was Outlies 14 FF 6	
		aring and Certificate of Mailing Required)
		ed amendment (Public Hearing Required)
		f Mailing Required) for
		equired) for
		ring and Certificate of Mailing Required)
Other (explain in detail)		
*An Application Pending Sign is req	uired to be posted on the pro	perty for <u>all</u> applications ten (10) days issign. ,
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Signature of Applicant	Signa	ture of Property Owner
0	Signa	and or respectly owner