TOWN OF EAST GRANBY

PLANNING DEPARTMENT
9 CENTER ST
EAST GRANBY, CONNECTICUT 06026
PHONE 1-860-413-3331 FAX 1-860-653-4017

Planning & Zoning Subdivision Application

File #: _____

Application For: ☐ Subdivision
☐ Resubdivision

Please Fill Out the Following Information Below

Property Address of Project: _____

Design District/Zone(s): _____ **Current Size (acreage) of Existing Parcel(s):** _____

Current Use: _____

Short Summary of Proposal:

_____

_____

_____

Applicant's Name: _____

Applicant's Mailing Address: _____

Applicant's Phone Number (include ext): _____ **Applicant's Email:** _____

Applicant's Representative: _____

Representative's Mailing Address: _____

Representative's Phone Number (include extension): _____

Representative's Email: _____

Does the Applicant own the subject property? ☐ YES (attach copy of DEED)

☐ NO (provide information below and include a letter of Authorization)

Owner's Name(s): _____

Owner's Principal Agent Name if Owner is Business entity: _____

Owner's Mailing Address: _____

Owner's Phone Number (include extension): _____

Owner's Email: _____

Subdivision Information

Check all that applies		
Proposed Sewage Disposal:	☐ Septic	☐Public Sewer
Proposed Water Supply:	☐ Well	☐ Public Water
Does subject property include any portion with wetlands and watercourses?	☐ YES	☐ NO
Does the proposal include any regulated activities in a FEMA Floodplain?	☐ YES	☐ NO

TOWN OF EAST GRANBY

PLANNING DEPARTMENT
9 CENTER ST
EAST GRANBY, CONNECTICUT 06026
PHONE 1-860-413-3331 FAX 1-860-653-4017

How many lots are being proposed: _____ Smallest lot in square feet: _____

Length (feet) of shortest lot frontage:_____ How many new streets are proposed to be Town dedicated: _____

How many private streets are proposed: _____ Total acreage of Open Space proposed:_____

Please check the classification of proposed street types and include lengths in feet as well as quantity of each street:

☐ Cul-de-sac(s): _____ ☐ Local Connector(s): _____ ☐Minor Collector: _____

Quantity: _____ Quantity: _____ Quantity: _____

Environmental Information

Are there environmental restrictions on the property? ☐ YES ☐ NO

If YES, please list: _____

Phase I: Land Records reviewed for any environmental hazards? ☐ YES ☐ NO

Phase II: Environmental Hazards Identified? ☐ YES ☐ NO

If YES above, please list hazards found: _____

Phase III: Is there a remediation plan? ☐ YES ☐ NO

If YES above, please briefly describe:

_____

The undersigned hereby permits town staff and commission members to enter into and inspect this site during reasonable hours for the purpose of reviewing this application and accompanying plans. I hereby depose and say that all of the above statements as well as the statements contained in all papers filed herewith are true.

☐ I have reviewed and acknowledged the Land Use Application Guide for further instructions on how to complete my application.

Applicant Signature: _____ Date: _____

Printed Name: _____