

**TOWN OF ROXBURY  
APPLICATION FOR ZONING PERMIT**

**FEE \$140 --- Payable to Town of Roxbury**

**(Above includes \$80 application fee + \$60 State Land Use Fee – effective 10/1/09)**

*Application will not be processed without payment of fee*

*Application:*

*Date Received:* \_\_\_\_\_ *Date Accepted:* \_\_\_\_\_ *To be processed by:* \_\_\_\_\_

**OFFICE USE ONLY:**

Wetlands Permit \_\_\_\_\_ Date issued \_\_\_\_\_

Zoning Permit: Fee Paid \_\_\_\_\_ Date \_\_\_\_\_ Permit # \_\_\_\_\_ Date Issued \_\_\_\_\_

APPROVED BY: Chairman, Zoning \_\_\_\_\_ date \_\_\_\_\_

Zoning Enforcement Officer \_\_\_\_\_ date \_\_\_\_\_

Application is hereby made for a Zoning Permit. Applications for buildings, structures, materially altered or rebuilt structures shall be submitted with an A-2 Survey in accordance with Section 7.1 of the Roxbury Zoning Regulations. These Regulations require an A-2 Survey prepared by a CT Licensed Surveyor showing to scale the size and location of all new construction, all existing structures on the site, distances from lot lines, the established street grades and proposed finished grades, a driveway plan, the location and size of septic fields; and it shall be drawn in accordance with an accurate boundary line survey. In addition, a complete set of construction plans showing floor plans and elevations shall be submitted.

PROPERTY OWNER: \_\_\_\_\_ phone \_\_\_\_\_

ADDRESS: \_\_\_\_\_

AGENT/BUILDER: \_\_\_\_\_ phone \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PROPERTY (for which permit is requested):

Street location: \_\_\_\_\_ Lot # \_\_\_\_\_ Assessor's Map \_\_\_\_\_ Zone: \_\_\_\_\_

Is property within the Roxbury Historic District? \_\_\_\_\_

DESCRIBE USE/ACTIVITY PROPOSED: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CATEGORY OF APPLICATION:**

1. Proposed building or structure and use thereof: \_\_\_\_\_

2. Sign permit \_\_\_\_\_ 3. Change of use of existing building or structure: Yes / No 3a. If yes, describe change of use: \_\_\_\_\_ 4. Other \_\_\_\_\_

**NEW CONSTRUCTION**

**DESCRIBE CONSTRUCTION OF STRUCTURE:**

Frame: \_\_\_\_\_ Brick : \_\_\_\_\_ Concrete: \_\_\_\_\_ Other: \_\_\_\_\_ Height: \_\_\_\_\_  
 First floor area: \_\_\_\_\_ Second floor area: \_\_\_\_\_ No. bedrooms: \_\_\_\_\_ No. baths: \_\_\_\_\_  
 Building Lot Area: \_\_\_\_\_ Street Frontage \_\_\_\_\_ Distance to Street Line: \_\_\_\_\_  
 Distance to nearest side Boundary Line: \_\_\_\_\_ Distance to Rear Boundary Line: \_\_\_\_\_  
 Estimated cost: \_\_\_\_\_

There are \_\_\_\_\_ existing buildings and structures on the lot as indicated below:

**Structures:**

**#1**

**#2**

**#3**

	#1	#2	#3
<i>USE</i>			
<i>Total Square feet</i>			
<i>Height</i>			
<i>Front Setback</i>			
<i>Rear Setback</i>			
<i>Side Setback</i>			
<i>Side Setback</i>			
<i>Stories</i>			
<i>Ground coverage</i>			

**PLEASE COMPLETE THE FOLLOWING:**

Is an A-2 Survey map (with a Licensed CT Surveyor's original signature) showing lot location, surrounding parcels, road frontage and position and dimensions of existing and proposed buildings attached? \_\_\_\_\_

Is the location of septic system and water supply designated on map? \_\_\_\_\_

Will proposed construction and septic systems be staked out on the property?

Is lot in Federal Flood Hazard Zone? \_\_\_\_\_ Is this lot within an approved subdivision? \_\_\_\_\_

If so, give subdivision name: \_\_\_\_\_

List below any additional data and/or plans submitted with this application:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**THE FOLLOWING PERMITS HAVE BEEN OBTAINED:**

- 1) *Inland Wetlands* # \_\_\_\_\_
- 2) *Zoning Board of Appeals* # \_\_\_\_\_
- 3) *Sanitarian* # \_\_\_\_\_
- 4) *Driveway (Selectman)* # \_\_\_\_\_

Approval of this application or issuance of a zoning permit shall not be considered to constitute compliance with any other regulations, ordinances or law or relieve the undersigned from responsibility to obtain permit thereunder.

The undersigned declares that all information supplied on this form and on accompanying documents is true and that submittal of any false information constitutes reason for denial of a permit and/or revoking any permit issued for the proposed activity.

I declare that the above information is true, correct and complete:

Signature of Owner: \_\_\_\_\_ date: \_\_\_\_\_

Signature of Agent/Builder: \_\_\_\_\_ date: \_\_\_\_\_  
(Letter of authorization from owner may be required)

**PLEASE NOTE: In addition to a Zoning Permit, a Building Permit signed by the Roxbury Building Official is required before construction can begin.**

FOR COMMISSION USE: Public Hearing Date: \_\_\_\_\_ To Planning Commission \_\_\_\_\_

Decision by Zoning Commission: Approved: \_\_\_\_\_ Permit issued: \_\_\_\_\_ Denied: \_\_\_\_\_

If denied, was decision appealed? \_\_\_\_\_