

APPLICATION FOR APPROVAL OF SITE & ARCHITECTURAL PLANS AND / OR REQUESTED USES

Complete, notorize, and forward thirteen (13) hard copies and one (1) electronic copy in PDF format to Clerk of the Zoning Board with a \$1,000.00 Public Hearing Fee and the required application filling fee (see Fee Schedule below), payable to the City of Stamford.

NOTE: Cost of required Public Hearing advertisements are payable by the Applicant and performance of required mailing to surrounding property owners is the sole responsibility of the applicant. **LAND RECORDS RECORDING FEE**: \$60.00 for First page - \$5.00 for each additional page)

Fee Schedule -WITHOUT GDP

Site Plans 20,000 sq. ft. or less of building area application fee –without GDP	\$460.00			
Site Plans more than 20,000 sq. ft. of building area-application Fee –without GDP	\$460.00 + \$30 per 1,000 sq. ft. or portion thereof in excess of 20,000 sq. ft.			

Fee Schedule -WITH GDP

Site Plans 20,000 sq. ft. or less of building area application fee –with GDP.	\$260.00
Site Plans more than 20,000 sq. ft. of building area-application Fee –with GDP.	\$260.00 + \$10 per 1,000 sq. ft. or portion thereof in excess of 20,000 sq. ft.

APPLICANT NAME (S):
APPLICANT ADDRESS:
APPLICANT PHONE #:
IS APPLICANT AN OWNER OF PROPERTY IN THE CITY OF STAMFORD?
LOCATION OF PROPERTY IN STAMFORD OWNED BY APPLICANT (S):
ADDRESS OF SUBJECT PROPERTY:
PRESENT ZONING DISTRICT:
TITLE OF SITE PLANS & ARCHITECTURAL PLANS:
REQUESTED USE:
LOCATION: (Give boundaries of land affected, distance from nearest intersecting streets, lot depths and Town Clerk's Block Number)
NAME AND ADDRESS OF OWNERS OF ALL PROPERTY INVOLVED IN REQUEST: NAME & ADDRESS LOCATION
NAME & ADDRESS LOCATION

DOES ANY PORTION OF THE PREMISES AFFECTED BY THIS APPLICATION LIE WITHIN 500 FEET OF THE BORDER LINE WITH GREENWICH, DARIEN OR NEW CANAAN? ______(If yes, notification must be sent to Town Clerk of neighboring community by registered mail within 7 days of receipt of application – PA 87-307).

DOES THE PROJECT RESULT IN THE CREATION OF 10 OR MORE UNITS OR 10,000 SF OR MORE IN FLOOR AREA OR DISTURBANCE OF 20,000 SF OR MORE IN LAND AREA, THROUGH NEW DEVELOPMENT, RECONSTRUCTION, ENLARGEMENT OR SUBSTANTIAL ALTERATIONS? ______ (If yes, then complete the Stamford Sustainability Scorecard per Section 15.F).



DATED AT STAMFORD, COM	NNECTICUT,	THIS	DAY OF	20	
		SIGNED: _			
Stamford Planning Board. I the Zoning Board at least th	f applicant w ree (3) worki	ishes to withing days prio	ndraw the application, this i r to public hearing in order	ve elapsed from the date of referral to must be done in writing, and be receiv to provide sufficient time to publicize hearing date will <u>not</u> be rescheduled	ved by e the
STATE OF CONNECTICUT	ss STAMFO	RD_		20	
COUNTY OF FAIRFIELD	00 017				
Personally appeared the truth of the contents thereo			, sigr	ner of the foregoing application, who mad	de oath to
			Notary Publ	ic - Commissioner of the Superior Court	t İ
FOR OFFICE USE ONLY					
APPL. #:		Received in	n the office of the Zoning Boa	rd: Date:	
			Pur.		

Revised 9/02/20