



APPLICATION FOR SPECIAL PERMIT

Complete, notarize, and forward **thirteen (13) hard copies and (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 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

Special Permit 20,000 sq. ft. or less	\$460.00
Special Permit more than 20,000 sq. ft.	\$460.00 + \$30 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 SPECIAL PERMIT: (Attach written statement describing request)

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:

<u>NAME & ADDRESS</u>	<u>LOCATION</u>
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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).

