



Town of Bolton

222 BOLTON CENTER ROAD • BOLTON, CT 06043

BOLTON PLANNING AND ZONING COMMISSION

APPLICATION FOR AMENDMENT TO ZONING REGULATIONS OR CHANGE OF ZONE

1. Type of Application:
 Amendment to Zoning Regulations
 Change of Zone
2. Applicant(s) _____
Address _____ Zip _____
Phone # _____ Fax # _____ E-mail _____
3. Owner(s) of subject property (if Change of Zone; append list if necessary) _____

Address _____ Zip _____
Phone # _____ Fax # _____ E-mail _____
4. Official Contact / Representative regarding this Application: _____
Address _____ Zip _____
Phone # _____ Fax # _____ E-mail _____
5. Location of Subject Property / Properties (if Change of Zone; append extra sheet if necessary):
Street Address(es): _____
Bolton Assessor's Map # _____; Block # _____; Lot # _____.
Bolton Land Records: Vol. _____; Page: _____
6. Current Zoning District (if Change of Zone): _____
7. Proposed Zoning District (if Change of Zone): _____
8. Describe Amendment to Zoning Regulations or Change of Zone; provide reason for amendment; demonstrate consistency with Bolton Plan of Conservation & Development (attach additional sheets if necessary): _____

9. Application Requirements:

- a. ___ Amendment to Zoning Regulations
 - i. ___ Application Fee: \$___
 - ii. ___ Six (6) copies of Amendment language with additions / deletions in the context of the existing Regulations
- b. ___ Change of Zone
 - i. ___ Application Fee: \$___
 - ii. ___ Written evidence of Applicant’s legal interest in the subject property (ies) (deed, purchase agreement, etc.)
 - iii. ___ List of property owners located within 500 feet of property(ies) to be rezoned, as listed in the most current Bolton Assessor’s Records
 - iv. ___ Stamped mailing envelopes addressed to owners of property located within 500 feet of property(ies) to be rezoned, as listed in the most current Bolton Assessor’s Records (the applicant is responsible for the cost of certified mailings)
 - v. Six (6) sets of a Class “D” or higher boundary survey of the subject property(ies), prepared by a CT Licensed Surveyor depicting the proposed Change of Zone at a scale not smaller than 1”=100’, and depicting properties, names of property owners, and road ROWs within 500 feet.
 - vi. A list of all hazardous, or potentially hazardous, materials anticipated as part of the proposed use of the property.
 - vii. A written statement of intended use of the property

10. Applicant’s Endorsement:

I am a willful participant and fully familiar with the contents of this application.

Signature _____ Date _____

11. Owner’s Endorsement (for change of zone, only, and if separate from Applicant:

I am a willful participant and fully familiar with the contents of this application.

Signature _____ Date _____

For Town Use Only

Fee Paid _____ Check # _____

Date application received by Planning and Zoning Commission _____

Date of public hearing _____

Petition Received? Yes ___ No ___ Date (If Yes) _____

Date of Planning and Zoning Commission action _____

Date of newspaper publication of Planning and Zoning Commission action _____

Summary of Planning and Zoning Commission action _____

Revised June 2, 2009