



**TOWN OF NORTH STONINGTON  
LAND USE OFFICE**

40 Main Street, North Stonington CT 06359  
Phone: 860-535-2877 x26 Fax: 860-535-4554  
Website: [www.northstoningtonct.gov](http://www.northstoningtonct.gov)

**PRE-APPLICATION REVIEW FOR A CHANGE OF USE OR CHANGE  
OF USER**

**Property Address:** \_\_\_\_\_ **Application Received** \_\_\_\_\_

Property owner Phone #: \_\_\_\_\_ Fax# \_\_\_\_\_ E-mail \_\_\_\_\_

Property owner's mailing address: \_\_\_\_\_

Applicant/Agent Phone #: \_\_\_\_\_ Fax# \_\_\_\_\_ E-mail \_\_\_\_\_

Applicant/Agent's mailing address: \_\_\_\_\_

**PREVIOUS USE**

Name of Business: \_\_\_\_\_

Please describe the products and/or services offered: \_\_\_\_\_

**PROPOSED USE**

Name of Business: \_\_\_\_\_

Please describe the products and/or services to be offered: \_\_\_\_\_

Number of employees Hours & days of operation: \_\_\_\_\_

The internal changes to the building will include: \_\_\_\_\_

The external changes to the building will include (**Any & all signs will require a separate application**): \_\_\_\_\_

The changes to the site or property will include: \_\_\_\_\_

Please include any other relevant information: \_\_\_\_\_

**PLOT PLAN**

*In order to accurately review the project, it will be necessary for you to provide us with a floor plan, to scale, of the structure being used. The floor plan should include the location of the following:*

- |   |   |
|---|---|
| <input type="checkbox"/> Entrances/Exits    | <input type="checkbox"/> Stairs                         |
| <input type="checkbox"/> Windows            | <input type="checkbox"/> Bathrooms                      |
| <input type="checkbox"/> Shelving           | <input type="checkbox"/> Storage                        |
| <input type="checkbox"/> Partitions         | <input type="checkbox"/> Hallways                       |
| <input type="checkbox"/> Usage of Each Area | <input type="checkbox"/> Any other relevant information |

Additionally, a plot plan will be required, subject to the nature of the project. The plot plan should include the following information:

- Dimensions of lot
- Dimensions of proposed structures
- Adjacent streets/sidewalks
- Other existing uses on property
- Existing and/or proposed Outdoor Lighting (location and type)
- Existing or proposed Landscaping
- Dimensions of existing structures
- Distances from structures to property lines
- Portion of the building to be used
- Parking for customers/employees
- Curb cuts/driveway location
- Any other relevant information

**Completion of this form does not constitute Zoning approval. The information provided will assist the Zoning Enforcement Officer in determining the requirements for zoning approval. You will be contacted as soon as possible with a determination.**

Applicant/Agent's Signature \_\_\_\_\_

Property owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

*This project may require additional permits from other Town Departments. The applicant is responsible for contacting other departments.*

**CHANGE OF USE APPLICATION CHECKSHEET**  
**(Revised 11/13/2009)**

**DATE:**

**PROPERTY ADDRESS:**

**BRIEF PROPOSAL DESCRIPTION:**

**REQUIREMENTS: For ALL proposed Change of Use Applications, even where minor or no changes are being proposed for the expansion of the existing building footprint, please provide the following:**

1. Change of Use Zoning Permit. (Administrative-**Permitted use in the zone**) to include:
  - A. Narrative: To include a statement of use, the number of employees, anticipated number of patrons at any one time and hours of operation.
  - B. Plot plan of the property showing the locations of all existing and proposed buildings and uses on the site, well, approximate septic system location, sidewalks, or other site improvements.
  - C. Existing & proposed floor plans to scale or with dimensions. All rooms labeled.
  - D. Sketch plans of the existing and proposed change to the exterior of the building.
  - E. Sketched proposed landscape plan. (May be combined with B above.)
  - F. Plan showing existing and proposed parking and traffic flow into and off the site. (parking may have to be re-striped, and a handicap space may be required) Indicate # of required parking spaces per Section 1104
  - G. All existing and proposed outdoor lighting to be shown, and must meet zoning requirements. Lighting Plan may be required.
  - H. Signage: Any existing non-conforming sign(s) may be used provided there is no increase in the size or height of the sign. Dimensions and height of the existing signage are to be supplied along with the dimensions and height and sketch of the proposed new signage. New signage will require permits and must meet the current requirements of the Zone.
2. The Use of the site may be subject to other permits, conditions and or requirements of the Building Department, Health Department and Fire Department and other agencies that may have jurisdiction.
3. **This is not a complete list. As new information is received, or changes are made, additional permits or reviews may be required.**



Town of North Stonington  
Planning and Zoning Commission

# Application for Staff Approval

Application Number:	<input type="text"/>	Receipt Date:	<input type="text"/>	Fee:	<input type="text"/> \$		
<input type="checkbox"/> ZP	<input type="checkbox"/> AG	<input type="checkbox"/> LND DIST	<input type="checkbox"/> ACC	<input type="checkbox"/> CU/CUSR	<input type="checkbox"/> SFR	<input type="checkbox"/> FR SPLIT	<input type="checkbox"/> LLA

**Applicant:** Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Contact Info: Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Owner of Record:** Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Property Location:** \_\_\_\_\_

**Assessor Parcel Information:** Map:  Lot:  Deed Vol/Pg:

**Zoning District of Property:**  **Restrictive Overlay Area: (See Chapter 7)**   
R40 - R60 - R80 - C - HC - I - ED-RC      N/A - VPO - WSPO - SUO

**Specific Use as Listed under Zoning District in Regulations:**

**Detail of Use Requested:** \_\_\_\_\_

The applicant and property owner above are applying for a Site Plan Approval as specified above and in accordance with the Zoning Regulations of the Town of North Stonington.

\_\_\_\_\_  
Date Signature (Property Owner of Record)

**For Office Use Only:**  
Disposition and action taken by the Inland Wetlands Commission or Insignificant and Rights of Use Permits by the Inland Wetlands Officer. (Wetlands Permit is valid for 5 years form date of issuance as long as work has commenced)

Signature of IWC Chairman or WEO: \_\_\_\_\_ Date: \_\_\_\_\_

The above stated proposal is hereby certified to ( ) comply ( ) not comply with the Town of North Stonington Zoning Regulations. (Zoning Permit is Valid for 1 year from issuance See Sect. 1201(F))

Signature of PZC Chairman or ZEO: \_\_\_\_\_ Date: \_\_\_\_\_

**Basic Elements of the Plot Plan.** (Note: Proposed use or activity may have additional approval criteria specific to that use or activity.)

The following information shall be provided on an 8.5 x 11-inch plan (or greater), neatly drawn to scale.

1. Name, Address, North Arrow, Scale, and date of drawing;
2. Improvements to approved building lot showing:
  - All existing and proposed structures located on the property (principal and accessory)
  - Adjacent boundary lines and distances
  - Required Zoning District setback lines
  - Driveway location (if applicable)
  - Location of well and septic system (if applicable)
  - Location of any existing or proposed easements and deed restrictions affecting the property including Conservation and/or Open Space areas including any areas/easements required by the Inland Wetlands Commission.
  - Any other information deemed necessary by the ZEO to determine compliance with these Regulations.
3. A zoning compliance chart or table that indicates the dimensional and use requirements for the property in the Zone and how the proposed structure and uses will comply with the requirements.

**Please provide copies of the following:**

- Copy of the **Current Deed** (*Available from Town Clerk's Office*);
- Copy of **Property Card** (*Available from Tax Assessor's Office*);
- Copy of **Tax Map/Plot Plan** (*Available from Tax Assessor's Office*);
- Copy of any **ZBA variances** (if applicable) (*Check in Land Use Office*);
- Copy of the written notification/letter from the holder of any Conservation restriction on the property; and
- If the resident is not the owner, please provide a letter from the owner(s) identifying and approving the proposed home occupation.
- Copy of the building plans and renderings of any proposed building specifying siding materials specified (front, side, and rear elevations shall be shown).
- Any other information deemed necessary by the ZEO to determine compliance with these Regulations.

**Possible Conditions of Approval:**

- Prior Planning and Zoning Commission Approval; and/or
- Other State or Local Agency Approval.