



**TOWN OF LEBANON
PLANNING & ZONING COMMISSION
APPLICATION FOR PUBLIC HEARING
FOR SPECIAL PERMIT**

FOR OFFICE USE ONLY

Application # PZ- _____ - _____	Application Fee: _____
Date Submitted: _____	State of Connecticut Fee: _____
Public Hearing Date/Time: _____	Date Paid: _____ Total: _____
Action/Date: _____	Cash: _____ Check: # _____

This application must be completed in full or it will not be accepted.

1. Name(s) of applicant: _____

Address: _____

Phone: _____ **Email Address:** _____

CHECK ONE: Owner: _____ Agent for Owner: _____

2. Name(s) of property owner, if different from applicant:

Address: _____

Phone: _____ **Email Address:** _____

3. To whom should all official notices be mailed?

Name: _____

Mailing address, if different from above: _____

4. If the applicant is not the owner of the property and the owner will not appear at the public hearing, the applicant must submit a letter from the owner authorizing the applicant to act for the owner at the public hearing. Attach this letter to the application. Check one:

Authorization letter attached: _____ **Authorization letter not required:** _____

5. The undersigned hereby petitions the Lebanon Planning & Zoning Commission for a Special Permit pursuant to Sec. _____ of the Lebanon Zoning Regulations, for the following purposes (a separate sheet may be attached if more space is needed):

6. A site plan showing accurate lot dimensions, locations of well, septic tank and leach field, location, size and use of all buildings now on the lot and location, size and use of proposed building(s) must accompany this application.
7. Exact location of property:
 Street address (include street number): _____
 On the _____ side of the above street.
 (North) (South) (East) (West)
 Reference in Land Records: Volume _____ Page _____ Zoning District _____
 Map # _____ Lot# _____
8. I understand that I must notify neighbors and adjacent property owners by mailing notices via certified mail, return receipt required, to owners of land adjacent to the site and across the street and that failure to do so will result in a denial without prejudice. A new application fee will be required for a re-application. I am aware of the regulations of the Planning & Zoning Commission and agree to abide by them.

I give permission to the Planning & Zoning Commission and to their authorized agents to enter onto this property for the purpose of monitoring compliance with the regulations and/or conditions that may be part of this permit application.

9. I have enclosed one check for the required fees listed below.

_____ Public Hearing Application Fee:		\$300.00
_____ Site Plan Application Fee:	New	\$500.00 + \$100.00 per page
_____ Site Plan Application Fee:	Revised	\$100.00 + \$100.00 per page
_____ State of Connecticut Fee:		\$ 60.00
Total:		\$

10. I hereby swear that all statements contained in this application are true to the best of my knowledge & belief.

Signature(s) of owner: _____ Date: _____

_____ Date: _____

Signature(s) of applicant: _____ Date: _____

_____ Date: _____