ZONING PERMIT [Signs]

Town of East Windsor ◆ Zoning Permit

E-mail Address _____

Planning & Zoning Department ◆ Town Hall ◆ 11 Rye Street Broad Brook, Connecticut 06016 ◆ (860)-623-6030 Fax (860)-623-4798 **Application Type**: (check one) ☐ TEMPORARY SIGN New Sign ☐ REPLACEMENT OF EXISTING SIGN OTHER (explain) _____ Proposed Sign(s) ... Existing Sign(s) by type (i.e., Wall sign, window, free-standing, etc.) ... and size (dimensions): Lineal feet of street frontage Lineal feet of building frontage Square feet of building area Lot Area (sq. ft. or acres) Tax Assessor's Map #____ Block #____ Lot # ____ Zoning District(s): _____ ZBA Variance - A NO A YES (if yes, approval date) Property Address: (street and number)) _____ - ____ Applicant Name:_____Phone (Address: (mailing) Owner of Property: (if not applicant)

Phone (Owner Address: (mailing)_____ Who will be representing this application? List the Contact Person for staff inquiries below. Name: _____ Phone ()____ - ____ Cell / Pager _____

This Permit is hereby Issued or Denied - subject to conformance with the East Windsor Zoning Regulations, any Conditions of Approval attached hereto, and the attached plan.		
(Please attach sketch or drawing with size, content, and location of sign on building/property)		
TITLED:		
PREPARED BY:	DATED:	REVISED:
AND THE FOLLOWING CONDITIONS:		
NOTICE: The issuance of any zoning permit is based upor Enforcement Officer, of the parcel of land and of any plan(related to such zoning permit. Therefore, by accepting the contractors, subcontractors,heirs and assigns) understands expressed or implied, by the said town or its Zoning Enforcer said parcel of land for any construction and/or development	(s) for any proposed construction issuance of any zoning permit, is and agrees that such issuance ment Officer as to the adequacy ar	and/or development thereon as is the applicant (including its agents, is made without warrantee, either nd/or the suitability of neither (a) the
This permit shall be void if (a) work/activity not of (b) construction authorized date of issuance.	commenced within one (1) yorized is not completed with	
Failure to comply with the conditions of approval Windsor Zoning Regulations.	of this permit shall constitute	e a violation of the East
A Zoning Certificate of Compliance is required pri by Authorization of this permit.	or to the use of any structur	e or activity undertaken
I hereby certify that the above information is belief.	correct to the best of my l	knowledge and
Owner Signature: (if not applicant)	
Date		
Applicant Signature:		
Date		
This application was received	R OFFICE USE ONLY at the East Windsor Pla	anning Department on:
Signature of Zoning Enforcement Office	er	DATE
Signature of Zoning Enforcement Office Fee Paid: \$ Date Paid: Zoning Certificate of Co	Check #	Receipt #
Zoning Certificate of Co	mpliance	Approval Date