TOWN OF LISBON ZONING PERMIT APPLICATION

PLEASE CHECK THE APPROPRIATE LINE(S) AND COMPLETE THE REQUIRED	APPLICATION(S):		
SITE PLAN REVIEW OF PROPOSED DEVELOPMENT IN ACCORD	ANCE WITH SECTION	2.5 AND SECTION 12	
PLANNING AND ZONING COMMISISON ADMINISTRATIVE REVIEW	W OF CHANGES TO C	OMMERCIAL/INDUSTRIAL	
BUILDINGS AND PROPERTIES IN ACCORDANCE WITH SECTION			
SITE PLAN REVIEW OF ASSOCIATED SIGNAGE IN ACCORDANCE	E WITH SECTION 15.8		
		-	
PROJECT DESCRIPTION:			
PROJECT NAME	1005105		
PROJECT NAME TOTAL FLOOR ARE	ADEA IN SOLIABE EEET:		
	IA IN SQUARE FEET:_		
PARCEL IDENTIFICATION INFORMATION			
STREET ADDRESS OF PROPERTY IF AVAILABLE:			
MAP/BLOCK/LOT:			
VOLUME/PAGE:			
CORRESPONDENCE WILL BE SENT TO APPLICANT OR DESIGNATED AGENT. A			
> APPLICANT:	TELEPH	TELEPHONE:	
ADDRESS:	EMAIL:	EMAIL:	
APPLICANT'S AGENT (IF ANY):	TELEPH	TELEPHONE:	
> ADDRESS;	EMAIL:		
WINER / IRUSTEE:	TELEPHONE:		
ADDRESS:	EMAII ·		
ENGINEER/ SURVEYOR/ ARCHITECT:	TELEPHONE:		
> ADDRESS:	EMAIL:		
1. TO BE ACCEPTED BY THE PLANNING AND ZONING COMMISSION, THIS ENTIR PARTIES LISTED BELOW, AND SUBMITTED WITH THE REQUIRED FEE(S) AND MAREGULATIONS AND ORDINANCES. 2. THE SUBMITTAL OF THIS APPLICATION CONSTITUTES THE PROPERTY OWNED BY ITS CONSULTANT(S) TO ENTER PROPERTY FOR THE PURPOSE OF INSPECT	ER'S REEMISSION ES	ACCORDANCE WITH THE APPLICABLE	
The rest of the re	TION.		
3. I HEREBY, AGREE TO PAY ALL ADDITIONAL FEES AND/OR ADDRESS SUCH CO LISBON LAND USE FEES ORDINANCE.	OSTS DEEMED NECES	SSARY BY TOWN STAFF UNDER THE	
SIGNATURE OF APPLICANT/AGENT PRINTED NAM	IE OF APPLICANT/AGE	ENT	
SIGNATURE/RECORD OWNER PRINTED NAM	IE/RECORD OWNER		
PATE: FRINTED NAIM			
APPLICATION SUBMITTAL DATE:	EEE(S) DAI	D.	
DFFICIAL DAY OF RECEIPT:	/ LL(3) FAII	D	
P & Z COMMISSION ACTION:			
CHAIR'S SIGNATURE:	DATE:		
PON APPROVAL OF THIS APPLICATION BY THE PZC. AND COMPLIANCE MITH.	A04 DIDEORUS	DISICATIONS AND/OR CONTINUE	
EQUIRED, THE ZONING ENFORCEMENT OFFICER MAY ISSUE THE ZONING PER	MIT.	IN IOA HONS AND/OR CONDITIONS	
De	ATF:		

DIRECTIONS FOR SIGNAGE APPLICATIONS

- Please review your project with Michael J. Murphy, AICP, Lisbon town Planner prior to submitting an application. He may be reached at mmurphy@seccog.org.
- Print and completely fill out the Planning and Zoning Commission's Zoning Permit Application form, indicating your application is for "Site Plan Review of Associated Signage in Accordance with Section 15.8".
- Application MUST be signed by the applicant/agent AND property owner (or have a letter of consent from property owner submitted for the record).
- When a site plan is not required, please submit a written site-plan waiver request with your application.
- Please submit 15 (fifteen) copies of the completed application, including color copies of signage (8.5 x 11 or larger) with sign dimensions indicated, and any other pertinent materials that may be requested by the Town Planner.
- Fee for Zoning Permit Application for Signage: \$10 plus \$2.00 per square foot plus \$60.00 State fee.
- Submit the complete application including associated materials and appropriate fee (made out to Town of Lisbon) to the Planning and Zoning Commission, Lisbon Town Hall, 1 Newent Road, Lisbon, CT 06351
- The Commission meets once a month, generally on the first Tuesday of the month, unless otherwise noted.