



CITY OF DANBURY
155 DEER HILL AVENUE
DANBURY, CONNECTICUT 06810
(203) 797-4525

PETITION TO AMEND THE ZONING
MAP
Zoning Commission

Date: _____

Name, Address & Phone No. of Applicant : _____

Name and Address of any client or principal on whose behalf the petition is being submitted:

Name, Address & Phone No. of Agent : _____
(if applicable) _____

Address of Subject Property : _____

Present Zone: _____ **Proposed Zone :** _____

Tax Assessor's Lot No.: _____ **Acreage of Property :** _____

List all municipalities within five hundred (500) feet of the subject property : _____

State briefly why this petition should be granted : _____

Submit the following:

- 1) Filing Fees of \$410.00, payable to the City of Danbury (includes \$60.00 State Land Use Application Fee, as required per P.A. 09-3 §396 of C.G.S.);
- 2) Fifteen copies of Petition;
- 3) Fifteen copies of Legal Description of subject property;
- 4) Fifteen copies of Map of subject property;
- 5) A List of Names and Correct Mailing Addresses of all property owners within, adjacent to, or across the street from the subject property;
- 6) Plain business-sized envelopes addressed to all of the above-referenced property owners;
- 7) An Affidavit stating when and by whom the Tax Assessor's records were examined and stating that the list of property owners is complete. Please note that according to Section 10.I.4.b.(1) of the Zoning Regulations, the Tax Assessor's records must be examined **within 21 days** of the date this petition is submitted.

Signature of Applicant or Agent

Date Submitted