

TOWN OF AVON
PLANNING AND ZONING COMMISSION

APPLICATION # _____

SUBDIVISION APPLICATION

1. **APPLICANT**

Name _____
Business Address _____ Phone _____
Home Address _____ Phone _____
Fax _____ Email _____

2. **OWNER(S) OF RECORD**

Name _____
Business Address _____ Phone _____
Home Address _____ Phone _____
Fax _____ Email _____
Name _____
Business Address _____ Phone _____
Home Address _____ Phone _____
Fax _____ Email _____
Name _____
Business Address _____ Phone _____
Home Address _____ Phone _____
Fax _____ Email _____

3. **DESCRIPTION OF PARCEL**

Location _____
Area (acres) _____ (Square Feet, if less than 2 acres) _____
Parcel I.D.No. _____ Zone _____

4. **SUBDIVISION INFORMATION**

Subdivision Title _____
Number of Lots _____
[] Public Road [] Private Road [] No Road

5. **WETLANDS REFERRAL**

PLEASE REFER TO SECTION 8-26 OF THE CONNECTICUT GENERAL STATUTES.

6. **OPEN SPACE – please check one**

Dedication of open space land _____ Fee in Lieu of dedication of open space land _____

7. **APPLICANT'S SIGNATURE**

The undersigned warrants the truth of all statements made in conjunction with this application and consents to inspection of the site.

(Applicant's Signature)

(Print or Type Name and Title)

8. **OWNER(S) SIGNATURE(S)**

The undersigned owner(s) of record consent(s) to the submission of this application and to inspections of the site.

(Owner's Signature)

(Print or Type Name)

(Owner's Signature)

(Print or Type Name)

(Owner's Signature)

(Print or Type Name)

CHECK LIST
SUBDIVISION APPLICATIONS

- ___ Application Form
- ___ Application Fee
- ___ **SITE DEVELOPMENT PLAN (Sec. 4.02)**
- ___ **Nine (9) copies (24"x36") and eleven (11) copies (11"x17") showing:**
 - ___ 1. Names of subdivision, owner, applicant
 - ___ 2. Date, scale, north point
 - ___ 3. Key map at 1"=1000' showing the surrounding area and the proposed subdivision land
 - ___ 4. Boundary lines of the subdivision, names of abutting owners, layout of proposed lots (A-2 standards)
 - ___ 5. Existing contours at 2' intervals or less
 - ___ 6. Existing natural features, easements, and buildings
 - ___ 7. Proposed street and utility layout
- ___ **CONSTRUCTION PLANS (Sec. 4.03)**
- ___ **Seven (7) sets of plan and profiles (24"x36") showing:**
 - ___ 1. Title of subdivision, date, scale
 - ___ 2. Layout of existing and proposed street system
 - ___ 3. Existing and proposed grades of streets
 - ___ 4. Depth, invert, slope, and size of all utility and drainage facilities
 - ___ 5. Description of erosion control methods
- ___ **GRADING PLAN (Sec. 4.04)**
- ___ **Seven (7) copies (24"x36") showing:**
 - ___ 1. Title of subdivision, date, scale, north point
 - ___ 2. Layout of existing and proposed lot and street lines
 - ___ 3. Existing buildings, well and septic locations, and all test hole locations
 - ___ 4. Existing and proposed contours, drainage, and watercourses
 - ___ 5. Description of erosion control methods
- ___ **SUBDIVISION MAP (Sec. 4.05)**
- ___ **Nine (9) copies (24"x36") and eleven (11) copies (11"x17") showing:**
 - ___ 1. Names of subdivision, owner, applicant
 - ___ 2. Date, scale, north point
 - ___ 3. Key map at 1"=1000'
 - ___ 4. **Multidigit parcel numbers (obtain from Assessor PRIOR to submitting app.)**
 - ___ 5. Existing and proposed property and street lines and names of adjacent property owners
 - ___ 6. Area of all lots and total acreage of land
 - ___ 7. Dimensions and orientations of property lines
 - ___ 8. Existing and proposed monuments
 - ___ 9. A-2 certification
 - ___ 10. **Developable land and density calculations based on 10/21/57 configuration**
 - ___ 11. **Open Space**
 - ___ 12. Approval box
 - ___ 13. Aquifer Area Protection Notification Form (see attached)

Public Water Supply Watershed or Aquifer Area Project Notification Form

REQUIREMENT:

Within seven days of filing, all applicants before a municipal Zoning Commission, Planning and Zoning Commission, Zoning Board of Appeals or Inland Wetlands Commission for any project located within a public water supply aquifer or watershed area are regulated by Public Act No. 06-53 of the CT General Statutes to notify The Commissioner of Public Health and the project area Water Company of the proposed project by providing the following information.

To determine if your project falls within a public water supply aquifer or watershed area visit the appropriate town hall and look at their *Public Drinking Water Source Protection Areas* map. If your project falls completely within or contain any part of a public water supply aquifer or watershed you are required to complete the following information.

Note: You will need information obtained from the *Public Drinking Water Source Protection Areas* map located in the appropriate town hall to complete this form.

Step 1: Have you already notified The CT Department of Public Health (CTDPH) of this project? No ☐ Complete Steps 2 - 6

Yes, I have notified DPH under a different project name ☐

OR I have notified DPH under the same name but in the year _____, Complete Steps 4 - 6.

Step 2:

1. Name of public water supply aquifer your project lies within _____
2. Name of public water supply watershed your project lies within _____
3. Public Water Supply Identification number (PWSID) for the water utility that manages the watershed or well(s):
CT _____
4. Project Town _____

Steps 3: For 1-5 check all that apply

1. My project is proposing:
 - ☐ Industrial (factory)
 - ☐ Commercial (business)
 - ☐ Agricultural (farm, field, nursery)
 - ☐ Residential (housing – single or multiple family)
 - ☐ Recreational (trail, ball field, complex)
 - ☐ Transportation improvements (road widening or relocation, parking lot expansion)
 - ☐ Institutional (school, hospital, nursing home etc)
 - ☐ Quarry/Mining
 - ☐ Zone Change, please describe _____
 - ☐ Other, please describe _____
2. The total acreage of my project site parcel is:
 - ☐ 5 acres or less
 - ☐ Greater than 5 acres
3. My project site contains, abuts or is within 50 feet of a:
 - ☐ Wetland(s)
 - ☐ Stream
 - ☐ River
 - ☐ Pond or lake

4. Existing use of my project site is:

- ☐ Grassland/meadow;
- ☐ Forested;
- ☐ Agricultural;
- ☐ Transportation
- ☐ Institutional (school, hospital, nursing home etc)
- ☐ Residential; ☐ Quarry/Mining
- ☐ Commercial; ☐ Recreational
- ☐ Industrial.
- ☐ Other, please describe _____

5. My project will utilize (check all that apply):

- ☐ septic system
- ☐ existing public sewer ☐ new public sewer
- ☐ existing private well ☐ new private well
- ☐ existing public water supply ☐ agricultural waste facility
- ☐ new public water supply and I have ☐ applied for / ☐ did not apply for a *certificate of public convenience and necessity* from DPH

6. My project will contain this percentage of built up area (buildings, parking, road/driveway, pool):

- ☐ 10% or less
- ☐ 20% to 40%
- ☐ 50% or more

Step 4: Applicants Contact Information:

- a) Name _____
- b) Email address _____
- c) telephone and/or cell phone number _____
- d) fax number _____

Step 5: Provide the following project information if available:

- a) Project name _____
- b) Project site street address _____
- c) Project site nearest intersection _____
- d) Project site latitude and longitude _____

Step 6: SUBMIT FORM