TOWN OF NEWINGTON

131 Cedar Street Newington, Connecticut 06111

Town Planner

Tanya D. Lane
Acting Town Manager

Craig Minor
Town Planner

APPEAL NO._____ DATE_____

USE THIS FORM FOR APPEALING AN ORDER OF THE ZONING ENFORCEMENT OFFICER

ZONING BOARD OF APPEALS
TOWN OF NEWINGTON
131 Cedar Street
Newington, Connecticut 06111

ZONE _____

APPLICANTS_____

ADDRESS_____ PHONE _____

OWNERS_____

ADDRESS_____ PHONE _____

Address of affected premise. _____
(If business state name)

Type of Appeal ( ) Appeal ruling by Zoning Officer

Specify details of Appeal and describe the reasons for seeking reversal of the order:

_____

_____

_____

_____

On what portion of the Zoning Ordinance is the Appeal based – Provide Section Number:

_____

Owners' Signature _____

Phone: (860) 665-8575 Fax: (860) 665-8577
planning@newingtonct.gov
www.newingtonct.gov

REQUIRED APPEAL DOCUMENTS

1) Site plan / or plot plan to scale showing existing & proposed improvement.

2) Elevations of proposed structures

3) Sign to be prominently displayed **10 calendar days** prior to hearing.

FEES – Appeal of Zoning Enforcement Officer - No fee

Variance - $75.00

Sign Deposit - $40.00

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DATE: _____ **PETITION NUMBER:** _____

Petition Address: _____

- **I have received a Public Hearing Notice Sign and submitted the $40 sign fee.**
- **The sign will be posted in public view for the required <u>10 days prior</u> to my hearing date.**
- **I agree to return the sign within <u>five (5) days</u> after the public hearing.**

_____ _____

Print Applicant Name **Telephone No.**

*** Refundable Sign Fee: $ 40.00**

****Deposit shall be forfeited if Public Hearing sign is not returned to the Town Planner's office.***

☐ **Check#**_____ **or** ☐ **Cash**

Sign Returned on _____ /_____ /_____

_____

Applicant Signature

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