

<i>For Office Use Only</i>
APPLICATION NO. _____
DATE FILED: _____
DECISION DATE: _____
DECISION: _____

**CITY OF BRISTOL, CONNECTICUT  
APPLICATION FOR SITE PLAN APPROVAL**

The undersigned Applicant hereby applies for approval of a Site Plan for the following use:

\_\_\_\_\_, a  permitted use  Special Permit use  
under Section(s) \_\_\_\_\_ of the Bristol Zoning Regulations.

Address or Location of the Property: \_\_\_\_\_

Assessor's Map No.: \_\_\_\_\_ Assessor's Lot No.(s): \_\_\_\_\_

Zone of the Property: \_\_\_\_\_ Size of the Property (in acres or square feet): \_\_\_\_\_

Does this application involve an activity regulated by the Inland Wetlands Agency?  yes  no

If yes, has an application for a permit been submitted to the Inland Wetlands Agency?  yes, on \_\_\_\_\_  no

Other comments: \_\_\_\_\_

NOTE: Section 8-3(g) of the Connecticut General Statutes requires that, if an application for a Site Plan involves an activity regulated under the Inland Wetlands and Watercourses provisions of the statutes, the applicant shall submit an application for a wetlands permit to the local Inland Wetlands Agency no later than the day the Site Plan application is filed.

APPLICANT (If more than one, list on Page 2)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

CHECK ONE:  owner  other: \_\_\_\_\_

OWNER(S) OF RECORD (If other than Applicant; if more than one, list on Page 2)

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**The following shall be included as part of this application:**

- filing fee – \$310 (includes \$60 State fee) *plus* \$50 per dwelling unit *plus* \$10 per 1,000 sq. ft. or portion thereof of proposed non-residential building (make checks payable to "City of Bristol")
- seven copies of a Site Plan containing all information required on the Site Plan Requirements Checklist
- any other data and drawings as may be required (e.g., drainage calculations, exterior building elevations)

**THIS APPLICATION MUST BE FILED IN PERSON NO LATER THAN 12 NOON ON THE DEADLINE DAY FOR APPLICATION SUBMISSION – NO EXCEPTIONS!**

**CITY OF BRISTOL, CONNECTICUT  
SUPPLEMENTARY INFORMATION**

*For Office Use Only*  
APPLICATION NO. \_\_\_\_\_

Address or location of property: \_\_\_\_\_

**ADDITIONAL INFORMATION/COMMENTS (click inside the box below and begin typing)**

**ADDITIONAL APPLICANT**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

CHECK ONE: [ ] owner [ ] other: \_\_\_\_\_

**ADDITIONAL OWNER(S) OF RECORD**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**(OPTIONAL) SEND COPIES OF ALL CORRESPONDENCE TO:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_