TOWN OF ESSEX
LAND USE APPLICATION
PART ONE

PLEASE CHECK THE APPROPRIATE LINE(S) AND ATTACH THE APPROPRIATE APPLICATION(S):

SPECIAL EXCEPTION _____ VARIANCE/ APPEAL _____
SITE PLAN REVIEW _____ APPROVAL OF LOCATION _____
INLAND WETLANDS PERMIT _____ REGULATION TEXT AMENDMENT _____
INLAND WETLANDS PERMIT - AGENT APPROVAL _____ ZONE CHANGE _____
_____ COASTAL SITE PLAN REVIEW _____
WETLAND PERMIT TRANSFER _____ MODIFICATION OF PRIOR APPROVAL _____
SUBDIVISION / RESUBDIVISION _____ SPECIAL FLOOD HAZARD AREA PERMIT _____

PROJECT DESCRIPTION:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
PROJECT NAME:__________________________________________
STREET ADDRESS OF PROPERTY______________________________________________________
ASSESSOR’S MAP ________ LOT ________ LOT SIZE __________________ DISTRICT _______
APPLICANT _________________________________________________________________________
_______________________________________ PHONE ___________________________
APPLICANT’S AGENT (if any) __________________________________________________________
_______________________________________ PHONE __________________________
ENGINEER.SURVEYOR/ARCHITECT ___________________________________________________
________________________________________ PHONE ___________________________

Note:
1) TO BE ACCEPTED BY THE LAND USE OFFICE. THIS APPLICATION MUST BE COMPLETED, SIGNED, AND SUBMITTED WITH THE REQUIRED FEE(S) AND MAP(S) PREPARED IN ACCORDANCE WITH THE APPLICABLE REGULATIONS.
2) THE SUBMITTAL OF THIS APPLICATION CONSTITUTES THE PROPERTY OWNER’S PERMISSION FOR THE COMMISSION OR ITS STAFF TO ENTER THE PROPERTY FOR THE PURPOSE OF INSPECTION.
3) I HERBY TO PAY ALL ADDITIONAL FEES AND/OR ADDRESS SUCH COSTS DEEMED NECESSARY BY THE LAND USE OFFICE AS DESCRIBED IN PART THREE OF THIS APPLICATION.
TOWN OF ESSEX  
Zoning Commission  
Essex Town Hall, 29 West Avenue  
Essex, Ct 06426

Petition for a Text Amendment of Zoning Regulations  
or  
Petition for a Change to the Town’s Zoning Map  
PART TWO

Signature of Property Owner(s): ________________________________________________  
Or Petitioner  
________________________________________________

Address:  
________________________________________________

Application # ________________ Date of Receipt ________________

The undersigned request a text amendment to the Essex Zoning Regulations.

[ ] This petition requests a change in zoning regulations and there is attached:

1) A full text of the proposed change in the zoning regulations clearly indicating existing provisions to be repealed and the new provisions to be enacted.

2) A complete and comprehensive statement of the reasons for any proposed changes, including any special interest the Petitioner(s) may have in such change, is attached.

[ ] This petition requests a change to the Town’s Zoning Map and there is attached:

1) A map clearly showing the area to be re-classified and specifying the present classification and proposed new classification with existing and proposed boundaries.

2) A list, keyed to the map, of the names and addresses of the record owners of and within the area to be affected, and within 500 feet outside the area to be affected by such reclassification, and

3) A complete written description, by metes and bounds or courses and distances, of the location of any new zoning district boundary or boundaries proposed.