

PLANNING AND ZONING COMMISSION

SUBDIVISION APPLICATION FORM

SECTION I: (check one)

1. Subdivision
2. Resubdivision
3. Informal Discussion

SECTION II:

1. Applicant's Name: _____ Phone: _____
2. Applicant's Address: _____
3. Property Location: _____ Zone: _____
4. Record Owner: _____
5. Assessor's Map No.: _____ Lot No.: _____
6. Deed Reference: Volume: _____ Page: _____
7. Proposed Name of Subdivision or Resubdivision: _____

8. Title and Date of Map: _____

9. Name, Address and License No. of Land Surveyor and/or Engineer: _____

10. Names and Addresses of All Abutting Property Owners:
(Use additional sheet if necessary) _____

11. Frontage on Public Street? yes ___ no ___
Frontage on Proposed New Street? yes ___ no ___
12. Area of Property: _____ Number of Lots: _____
13. Public Utilities Available: City Water (); City Sewer (); Gas ();
Other: _____
14. Easements, Deed Restrictions or Other Encumbrances upon the Property: _____

15. Does Applicant Propose to Dedicate to Public Use All Open Spaces Shown on the
Record Subdivision Map: _____
16. Are there any Inland/Wetlands or Watercourses on the Property? _____

Has the Application Been Referred to the Inland/Wetlands Commission? _____

Are There Any Special Flood Hazard Areas on the Property? _____
17. Does any road or driveway entrance enter into a State Road? _____
Has a Permit been obtained from the Connecticut Department of Transportation? _____

SECTION III:

1. ___ Fee Paid in Full
2. The owner, Applicant and/or other authorized agent hereby grant The Middletown Planning and Zoning Commission and/or its agent's permission to enter upon the property for which the subdivision application has been filed out purpose of inspection and enforcement of the Regulations of the City of Middletown.
3. I certify to the best of my knowledge that the above information is true and correct.

Date: _____
Applicant/Agent Signature

Date: _____
Owner's Signature

(For an informational discussion, application form should NOT be signed.)

(Effective on July 1, 1985)