



# TOWN OF BETHEL

Phone: (203) 794-8578

Planning & Zoning Department

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1 School St., Bethel, Connecticut 06801

## ZONING PERMIT

For more information visit [bethel-ct.gov](http://bethel-ct.gov) to view the zoning regulations and procedures

<b>PROPERTY ADDRESS:</b>			
<b>MAP:</b>	<b>BLOCK:</b>	<b>LOT:</b>	<b>ZONE:</b>

<b>OWNERS NAME:</b>	<b>Address:</b>	<b>Phone:</b>
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<b>APPLICANT'S NAME:</b>	<b>Phone:</b>
<b>Address:</b>	<b>Cell:</b>

### PROJECT DESCRIPTION (be specific)


**\*\*FOR OFFICE USE ONLY\*\***

### PROPERTY INFORMATION

<b>LOT AREA:</b>	Number of Dwelling Units:
<input type="checkbox"/> WETLANDS	<input type="checkbox"/> IWC Date:
<input type="checkbox"/> TOWN SEWER	<input type="checkbox"/> PRIVATE SEPTIC SYSTEM
<input type="checkbox"/> TOWN WATER	<input type="checkbox"/> PRIVATE WELL
	<input type="checkbox"/> FLOOD ZONE:
	<input type="checkbox"/> P.U.C. Date:
	<input type="checkbox"/> COMMUNITY WELL

<input type="checkbox"/> <b>Subdivision Date:</b>	<input type="checkbox"/> <b>Site Plan Date:</b>	<input type="checkbox"/> <b>Special Permit Date:</b>
<input type="checkbox"/> <b>Zoning Board of Appeals Variance #:</b>		<b>Date:</b>

<b>SETBACKS (ft.) (required/proposed)</b>	<b>Front:</b> /	<b>Side:</b> /	<b>Rear:</b> /
<b>Proposed Height:</b>	<b>Proposed Coverage:</b>		<b>%</b>

Referred to **Town Engineer** for:  Drainage  Grading  Driveway  Other Referred Date: \_\_\_/\_\_\_/\_\_\_ Received Date: \_\_\_/\_\_\_/\_\_\_

### THIS PERMIT IS SUBJECT TO THE FOLLOWING:

<b>FINAL INSPECTION BY:</b> <input type="checkbox"/> Zoning Official <input type="checkbox"/> Inland Wetlands Agent <input type="checkbox"/> Town Engineer	<b>A-2 SURVEY:</b> <input type="checkbox"/> FOUNDATION <input type="checkbox"/> FINAL "As Built"
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### CONDITIONS:


<b>ZONING PERMIT IS HEREBY:</b> <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> NOT REQUIRED
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Construction must begin within one (1) year from the date of issuance.

Permit # \_\_\_\_\_

### Applicants

**Signature:** \_\_\_\_\_  Applicant  Owner **DATE:** \_\_\_\_\_

### Zoning Official's

**Signature:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

## ZONING PERMIT CHECKLIST

**THE FOLLOWING ITEMS MUST BE ATTACHED:** (please check)

(2) Copy of an **"A-2" SURVEY** showing the existing structures, proposed additions, accessory structures, including dimensions and distances from property lines. If known, show easements, location of septic and well, wetlands, etc...(see attached sample).

(1) Copy of **SCALED DRAWINGS** (ex. 1/4"= 1') of the proposed construction including floor plans and elevations.

**"NEW HOUSE"** permits require (2) Copies of a detailed **SITE PLAN with drainage calculations and a Erosion & Sedimentation Plan** prepared by a licensed Civil Engineer.

If a **VARIANCE** was granted, this office will need (1) copy of the filed Variance Resolution in the Town Clerk's office.

(1) For a new building on a vacant parcel, a copy of the approved **SUBDIVISION MAP** from the Town Clerk's office.

*Soil and erosion devises must be installed in accordance with the 2002 DEP Guidelines for Erosion and Sedimentation Controls prior to the commencement of any site work.*

**Additional Comments:**

RESIDENTIAL ZONES DENSITY, AREA, SETBACK & HEIGHT REGULATIONS								
PRINCIPAL STRUCTURES & USES								
Zone	Lot Area (sf)	Front	Setbacks Side	Combined	Rear	Minimum Square	Minimum Lot Width	Maximum Lot Coverage
RR-10	10,000	20ft.	5ft.	15ft.	35ft.	80ft.	70ft.	35%
R-10	10,000	20	5	15	35	80	70	30
R-20	20,000	30	10	25	35	100	70	20
R-30	30,000	35	10	25	35	120	80	20
R-40	40,000	40	20	50	35	140	100	15
R-80	80,000	50	25	50	40	160	140	15
PRINCIPAL STRUCTURES & USES			ACCESSORY STRUCTURES & USES					
Zone	Stories	Height	Front	Side	Rear	Stories	Height	
RR-10	2.5	35ft.	20ft.	5ft.	10ft.	1	16ft.	
R-10	2.5	35	20	5	10	1	16	
R-20	2.5	35	30	10	15	1	16	
R-30	2.5	35	35	10	15	1	16	
R-40	2.5	35	40	15	20	1	16	
R-80	2.5	35	50	20	30	1	16	

For other zone requirements or for further information please refer directly to the Zoning Regulations.