



Town of Windsor Locks

Building, Planning & Zoning - 50 Church Street, Windsor Locks, CT 06096 860-627-1447

DRIVEWAY - ZONING REVIEW APPLICATION

This application cannot be approved until all required information is provided and may require review by other Departments to determine compliance with design, health and safety codes.

Project Site Address: _____ Windsor Locks, CT

Property Owner: _____ Phone: _____

Contractor / Company Name: _____

Applicant Address (if different) _____

Applicant Email: _____ Applicant Phone: _____

Contractor License Number: _____

Type of Project:

Property Type: Residential _____ Commercial _____ Industrial _____

Reconstruction or Resurface of Existing Driveway (no expansion) _____ or

Expand Existing Driveway _____ If expanding, what is the expansion area (sq. ft.)? _____

Please read the following requirements, include with them your application and sign below:

- I have included a plot plan showing the dimensions of the property, the location and dimensions of proposed construction or expansion, and the distances from the proposed construction or expansion to the property lines.**
- I understand that the requirements for locating and constructing driveways can be found in Section 225 and Appendix B, Sketch 8 of the Windsor Locks Zoning Regulations, which are available at www.windsorlocksct.org or by calling the Building, Planning & Zoning Department at 860-627-1447.
- I hereby agree to conform to all the requirements of the Zoning Regulations of the Town of Windsor Locks and the Laws of the State of Connecticut and to notify the Zoning Official of any alteration in the specifications of the improvements indicated as part of this permit application.
- I understand that an encroachment permit may be needed for this project, and it is my responsibility to contact the Department of Public Works to obtain this permit. The Department of Public Works (6 Stanton Road, Windsor Locks) phone number is 860-627-1405.**

Applicant Signature: _____

Permit Number: _____ Approved: _____ Date: _____ Zoning Official Signature: _____ Comments: _____	
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