Application #_____ TOWN OF EAST HADDAM Rec. 8/26/25

PLANNING AND ZONING COMMISSION

APPLICATION FOR SITE PLAN/SPECIAL EXCEPTION REVIEW

(Section 14A and Section 14B)

Applicants Name David Burr

Property Location White Sands Rd Moodus Ct. ~~06248~~ 06469

Applicant's Mailing Address 32 Loudon Rd Hebron Ct. 06248

Phone No. 860-748-7924 Email harbormaster@comcast.net

Record of Owner David Burr

Assessor's Map # 066 Page #_____ Zone L Lots 227, 228 229, 230

Section under which application is made_____

APPLICATION FEE AND SUPPORTING DOCUMENTATION, INCLUDING LETTER FROM BUILDING OFFICIAL/SANITARIAN AND ZONING ENFORCEMENT OFFICER MUST BE IN THE PLANNING AND ZONING OFFICE THE WEDNEESDAY PRIOR TO THE MEETING TO BE PLACED ON THE AGENDA FOR DISTRIBUTION PURPOSES, 15 COMPLETE SETS OF THE APPLICATION AND SUPPORTING DOCUMENTS ARE REQUIRED. FOR DRAINAGE COMPUTATIONS THAT ARE EXTENSIVE, THE ENGINEER MAY SUBMIT 3 SETS OF THE FULL REPORT AND 12 COPIES OF THE SUMMARY.

_____ Attached checklist is completed

_____ Site Plan (Section 14A) and supporting documentation

_____ Letter from Building Official

_____ Letter from the Chatham Health District

_____ Report from Conservation Commission

_____ Report from Inland Wetlands Commission

_____ Letter from the Zoning Board of Appeals

_____ Description of proposed uses & structures

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Fee: $260.00 Site Plan Review includes $60.00 fee for DEEP Fund – PA-235
Fee: $360.00 Special Exception includes $60.00 fee for DEEP Fund – PA-235
Fee: (Variable Fee) Chatham Health District review form
FEE PAID_____
The owner and the applicant hereby grant the East Haddam Planning & Zoning Commission and/or its agents' permission to enter upon the property for which Site Plan Review is requested for the purpose of inspection and enforcement of the Zoning Regulations of the Town of East Haddam.

David Burr 8/26/2025

Applicants/Owner's Signature(s) **Date**

_____ _____

PLAN PREPARER PE/LS Signature **Date**