

Application No.: _____

FOR OFFICE USE ONLY Fee Paid: _____ Date of Submission: _____

Final Action: Approved: _____ Denied: _____ Withdrawn: _____ Date of Action: _____
Approved w/ Conditions: _____ Action By: _____



City of Groton, CT
Department of Planning & Economic Development

Form 1 - Planning and Zoning Application

*Submit all applications and fees in person at the
Building and Zoning Department, 295 Meridian St, Groton, CT 06340
M-F between 8:00AM – 4:30PM.*

*For more information please visit us at the above address or call to schedule an appointment:
City Planner: 860-446-4169, Dennis Goderre, ASLA, AICP CUD
Building and Zoning Officer: 860-446-4104, Carlton Smith*

Important Considerations

Applications that require Planning and Zoning Commission review must be submitted three (2) weeks in advance of a regularly scheduled meeting date. See the Planning and Zoning webpage for schedules. Eight copies of all application materials shall be submitted unless otherwise directed by staff. PDF of all application material shall accompany the submission and all fees paid at time of application.

The application will be received at the next regularly scheduled meeting that follows the date of submission. If the meeting is canceled, the date of receipt will remain the date the meeting would have occurred. The Commission will not review the application at this meeting. The Commission will review the application, and if appropriate, take action to approve or deny the application at the following meeting (approximately six (6) weeks following the date of submission). This will allow time for staff review and the applicant to respond to staff comments. More time may be warranted. If a public hearing is required, the hearing may not occur until the second meeting following the date of receipt.

NOTE: Prior to making application a Pre-application meeting is recommended as outlined in Section 9.1 of the Zoning Regulations.

Application Type

Select all application(s)¹ you are applying for and attach the completed form(s) as referenced:

- | | |
|--|--|
| <input type="checkbox"/> Zoning Permit (Form A) | <input type="checkbox"/> Subdivision/Lot Line Revision (Form D) |
| <input checked="" type="checkbox"/> Site Plan (Form A inc. Zoning Table) | <input type="checkbox"/> Lot Combination (Form D) |
| <input checked="" type="checkbox"/> Special Permit (Form A) (See footnote one) | <input type="checkbox"/> Zoning Amendment (Map) (Form E) |
| <input checked="" type="checkbox"/> Coastal Area Management (Form A and B) | <input type="checkbox"/> Zoning Amendment (Text) (Form E) |
| <input type="checkbox"/> Floodplain Development (Form A and C) | <input type="checkbox"/> Site Plan Subdivision – Major Mod. ² |

¹ If new exterior building construction or site improvements are proposed a Site Plan approval is required in addition to a Special Permit

² Utilize all relevant forms resubmitting as required above.

Property InformationProperty Address³: 70 Bridge Street; City of Groton, CT 06340 Latitude: 41.3628 Longitude: -72.0824Property Size: 0.83+/- Acres 36,271+/- SF In flood zone: Yes⁴ No In CAM Zone: Yes⁵ No Zoning District(s): GC - General CommercialParcel ID 168914333728 Information can be obtained at <http://maps.groton-ct.gov/apps/GrotonViewer/>*If more than one property is part of the project, separate application forms and fees must be submitted for each property.***Property Owner Information**Name(s): Bridge Street Leasing LLCAttn: Thomas GreenStreet Address: PO Box 963City: Niantic State: CT Zip Code: 06357Phone: 860.961.8709 Mobile: 860.961.8709 Email: tgreen70@frontier.com**Applicant Information***Note: Designer/representative/architect/engineer is NOT the applicant (see Agent contact information below).* Please check if Applicant is the same as Property Owner

Name: _____ Company: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Mobile: _____ Email: _____

Agent/Primary Point of Contact (may be designer/representative/architect/engineer)Name: Edward H. Wenke III PE Company: The Winthrop Group IncAddress: PO Box 359 City: North Stonington State: CT Zip Code: 06359Tel. 860-460-1606 Fax 860-495-5563 Email: ewenke@comcast.net³ Address shall correspond to the address identified on the Assessors Property Information <http://maps.groton-ct.gov/apps/GrotonViewer/>⁴ If within a Flood Protection Overlay Zone Form C must accompany this application. See Section 5.3 FP Overlay Zone⁵ If in a CAM area Form B must accompany this application. See Section 5.2 CAM Zone

Signatures (all owners)

By signing below it is acknowledge that;

1. This entire application must be completed, signed, and submitted with the required fee(s) and map(s) prepared in accordance with the applicable regulations or the application may be deemed incomplete or be denied;
2. This application constitutes the property owner’s permission for the commission or its staff to enter the property for the purpose of inspection;
3. The applicant agrees to pay all additional fees and/or address such costs deemed necessary by the Department of Planning and Economic Development as described in the City Fee Ordinance; and
4. That the information provided herein and any supplemental information that may be provided in support of the application is accurate to the best of my knowledge and truthfully represents the information it is intended to support, including but not limited to, property descriptions, use descriptions, calculations, and methods and means of construction and all representations made.


11/13/18
 Applicant: _____ Date: _____
 Printed Name: Bridge Street Leasing LLC - Atn. Thomas Green


11/13/18
 Agent: _____ Date: _____
 Printed Name: Edward H. Wenke III, PE - Engineer-Of-Record

Owner(s) of Record:


 Owner: _____ Date: 11/13/18
 Printed Name: Bridge Street Leasing LLC - Atn. Thomas Green

If held in a Trust, name of Trust: _____

Owner: _____ Date: _____
 Printed Name: _____

Owner: _____ Date: _____
 Printed Name: _____