



TOWN OF SOUTHURBY

LAND USE OFFICE
501 Main Street South
Southbury, Connecticut 06488
(203) 262-0634

ECONOMIC DEVELOPMENT COMMERCIAL QUERY FORM

DATE OF REQUEST: _____

APPLICANT NAME: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

ADDRESS OF PROPERTY: _____

PROPOSED MODIFICATION DETAILS TO BUILDING OR SITE:

ANY OTHER PERTINENT INFORMATION OR SPECIFIC QUESTIONS:

** This form is for Land Use related applications only.

Statement of Use Form

Date: _____

Permit # _____

** This application is to be submitted with a Zoning Permit Application; and if applicable a Building Application and Health Department Application. **

Name of Applicant _____

Address of Business _____

The following information is needed to determine compliance with the Southbury Zoning Regulations

Detailed descriptions (Statement of Use) for the following should be attached to the application:

1. Nature and extent of proposed use. Please provide details regarding the conduct of the business, including business hours, anticipated number of vehicle trips, noise, lighting and number and types of vehicles associated with the business use:
2. Type of water supply connection, average daily demand, considered a potential high water consumer.
3. Sewage disposal; waste disposal; drainage type of connection(s):
4. Number of persons employed and estimate of required number of parking spaces:

5. Daily number of vehicle trips:

6. Any toxic or hazardous waste materials utilized and a description of how these materials are managed and disposed of.

7. Sign size and location:

It is helpful to us and will greatly speed the approval of your permit if you provide all the above information at one time.

Providing all requested information at once will also reduce the time and expense to you of having to obtain multiple Zoning Permits for each item (one for Statement of Use, one for a sign permit, etc.).

Signature of Applicant and Date Signed _____

Signature of Property Owner and Date Signed _____

Approvals

Zoning Building Fire Marshal
 Planning Wetlands Health Department