

**APPLICATION FOR A ZONE CHANGE (map)**

Town Hall, 415 Route 169, Woodstock, CT 06281, (860) 963-2128 x332, Fax (860) 963-7557

Application # : _____ Date Submitted : _____ Fee: \$ _____ Check Submitted By: _____ PZC Receipt Date: _____
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*ALL APPLICANTS FILL OUT THIS SECTION — PLEASE PRINT*

Submit completed application to the Town Planner during regular business hours.

(include additional pages, if necessary to include all parties involved)

**Applicant Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Contact Person / Representative:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Location of Property:** \_\_\_\_\_

Number and Street or Road

Assessor's Map: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

**Existing Zone:** \_\_\_\_\_

**Proposed Zone:** \_\_\_\_\_

**Please note:** All applications for Zone Changes should incorporate into the proposal all related sections of the Regulations that must also be amended to ensure consistency among the various regulatory provisions.

**BY SIGNING THIS FORM, YOU AGREE TO ALLOW MEMBERS OF THE COMMISSION AND THE AGENT ACCESS ON TO THE PROPERTY TO EVALUATE THE APPLICATION OR CONDITIONS OF THE APPLICATION.**

**APPLICATION TO AMEND THE REGULATIONS or for ZONE CHANGE (map)**

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Refer to **Zoning Regulations, Article \_\_\_\_, Section \_\_\_\_.** for procedures and requirements for amending the regulations with a text change or for the establishment of a new Zone. Please review this section carefully.

(please provide additional pages if necessary)

**Proposal Details:**

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**Statement of Justification** must substantiate the following:

- a. compatibility with the Woodstock Plan of Conservation and Development
- b. The reason for the proposed change(s)
- c. The effects the change would have on the health, safety, welfare and property values of Woodstock Residents.

**Statement of Justification:**

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**\*PLEASE NOTE: If the application is on a Scenic Road, additional approval is necessary from the PZC.**

**APPLICATION TO AMEND THE REGULATIONS or for ZONE CHANGE (map)**

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**Application Timeline Details** *(section below to be completed by Town Staff)*

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Date of Receipt: \_\_\_\_\_

Public Hearing Date Scheduled: \_\_\_\_\_

Public Hearing Continued: \_\_\_\_\_

Public Hearing must close by: \_\_\_\_\_

Date Action Taken: \_\_\_\_\_ Appeal Period Ends: \_\_\_\_\_

Action Taken: Approved  Denied

Reason: \_\_\_\_\_

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**Post-decision procedure** (If Approved)

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Zone Change does not take effect until the following is completed:

1. Decision Legal notice has been published according to required timelines in newspaper
2. Appeal period expires
3. Revised Zoning Map has been filed in the Town Clerk's Office

Date legal notice published: \_\_\_\_\_ Name of Newspaper: \_\_\_\_\_

Appeal Period ends: \_\_\_\_\_

**Staff must also:**

Incorporate revised map into the full Zoning Regulations document and post updated map on website.

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