| AMENDMENT TYPE: | Application # : |
|-------------------------|---|
| Subdivision Regulations | Date Submitted : |
| Zoning Regulations | Fee: \$ Check Submitted By: PZC Receipt Date: |

ALL APPLICANTS FILL OUT THIS SECTION — PLEASE PRINT Submit completed application to the Town Planner during regular business hours.

| (include additional | pages, if necessary) |
|----------------------------------|---|
| Applicant Name: | |
| Address: | |
| Phone #: | |
| Email: | |
| Signature: | |
| Contact Person / Representative: | |
| Address: | |
| Phone #: | |
| Email: | |
| Signature: | Date: |
| ****** | * |

Proposed Amendment of (provide additional forms if necessary for each amendment):

| Article # | Section # | Title | |
|-----------|-----------|-------|--|
| | | | |

Please review the following carefully regarding information on Procedures and Requirements:

- For Zoning amendments: Zoning Regulations, Article ____, Section ____, or CGS 8-3
- For Subdivision amendments: CGS 8-25.

Please note: Applications for amendments shall include the exact wording of all proposed amendments and article and section references. All applications to amend regulations should incorporate into the proposal all related sections of the Regulations that must also be amended to ensure consistency among the various regulatory provisions.

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.

Application for TEXT CHANGE of the Regulations Town Hall, 415 Route 169, Woodstock, CT 06281, (860) 963-2128 x332, Fax (860) 963-7557

| Date of Official Receipt by PZC: | |
|---|-------|
| Regulation Amendment Process Check List (to be completed by staff) Date of Official Receipt by PZC: | |
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| Date of Official Receipt by PZC: | |
| Public Hearing must close by: | |
| Date Action Taken: Date Legal Notice Published: Appeal Period Ends: Action Taken: Approved Approved w/ Conditions Denied | |
| Public Hearing must close by: Date Action Taken: Date Legal Notice Published: Appeal Period Ends: Action Taken: Approved Approved w/ Conditions Denied Reason: | |
| Appeal Period Ends:Action Taken:ApprovedApprovedW/ ConditionsDenied | |
| Action Taken: Approved M Approved w/ Conditions Denied | |
| | |
| Reason: | |
| | |
| | |
| | |
| | |
| Post-decision procedure (If Approved, or Approved with Conditions) | |
| | |
| Amendment does not take effect until the following is completed: | |
| 1. Decision Legal notice has been published according to required timelines in newsp | paper |
| 2. Appeal period expires | |
| Date legal notice published: Name of Newspaper: | |
| Appeal Period ends: | |

Incorporate amendment into the full document and post full text of amendment on website.

For more information on the new fees, please refer to the ORDINANCE ESTABLISHING INDIVIDUAL COST-BASED FEES FOR MUNICIPAL LAND USE APPLICATIONS, effective September 12, 2009.

| Application for TEXT CHANGE of the Regulations | | | | | |
|--|----------------------|---------------------------|------------------|--|--|
| Town Hall, 415 Route 169 | Woodstock, CT 06281, | , (860) 963-2128 x332, Fa | x (860) 963-7557 | | |

| Text Change to Regulations Fee calculation sheet | | (fill in all items as applies to application) | |
|--|--------------------------------|---|------------|
| Itemized Charge Detail | | = | Item Total |
| | | | |
| Fee | \$300 Flat Fee | | |
| Public Hearing (additional) State Fee | \$225 Flat fee | | |
| (additional) | as may be amended and required | by state | \$60 |
| Total | | | |