



**TOWN OF TOLLAND**  
**APPLICATION FOR CERTIFICATE OF APPROVAL OF LOCATION**  
Prior to the submittal of your application, you must meet the elements of Tolland Zoning  
Regulation Section 21.  
Zoning Board of Appeals

App. # \_\_\_\_\_

**Property Information**

**Project/Business Name:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

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

**E-Mail Address:** \_\_\_\_\_

**Contact Phone #:** \_\_\_\_\_

**Applicant Information**

**Name:** (if different than above) \_\_\_\_\_

**Address:** (if different than above) \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Description of Property**

**Zone:** \_\_\_\_\_ **Acreage:** \_\_\_\_\_

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

**Street Address/Location:** \_\_\_\_\_

1. Is the property located in any of the following: (please check all that apply)

\_\_\_ Aquifer, Town or State \_\_\_ CT Water Supply System \_\_\_ Shenipsit Lake Watershed  
\_\_\_ Flood Zone, note zone designation  
\_\_\_ Within 500' of: \_\_\_ Vernon, \_\_\_ Coventry, \_\_\_ Willimantic, \_\_\_ Ellington, \_\_\_ Mansfield

2. Has a previous Certificate of Approval of Location ever been approved for: \_\_\_ No \_\_\_ Yes

If yes, give date, application number and name of previous application:

\_\_\_\_\_

Project Description:

3. List **names and addresses of all abutting property owners**, including across a public or private access right of way property owners, from the Assessor's records, **on an attached sheet of paper**. You may use the list provided by the Assessor's Office, provided you indicate the abutting property owners, or those across a public or private access right of way.

Please include the following items:

- Statement of Use (please use a separate page, provide details)
- Site Plan (Show parking spaces, outside storage of vehicles and designate the portion of the building to be used)
- Any deeds, easement, etc. necessary for this project.

The Applicant recognizes that the items listed above are required to constitute **a complete application only for the purpose of submission and receipt by the Board**. Nothing herein shall prevent the applicant from submitting, at the time of filing the application or at a later date, **additional data**, maps and documents as may be required by the Zoning Regulations.

The **Tolland Zoning Board of Appeals** is **hereby required to hold a public hearing** on all Certificate of Approval of Location applications pursuant to Section 21 of the Tolland Zoning Regulations.

*The owner and applicant hereby the Zoning Board of Appeals, or their authorized agents, Zoning Enforcement Officer, Town Planner and the Town's Engineer, permission to enter upon the property proposed for the Certificate of Approval of Location for the purpose of inspection and enforcement of the Zoning Regulation so the Town of Tolland.*

**14 copies of a sketch / plot plan** clearly showing the proposed location of the structure, property lines, and distance to property lines must accompany this application along with the appropriate fee. Please provide an electronic copy of the proposed plans. Please consult with staff.

All of the above statements and the statements contained in any documents and plans submitted herewith are true to the best of my knowledge:

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

**Agent Signatures:** \_\_\_\_\_

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

*A separate letter or email from owner authorizing permission to apply for a Certificate of Approval of Location, is also acceptable.*

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**OFFICE USE ONLY**

Fee Amount: \_\_\_\_\_ Official Date of Receipt: \_\_\_\_\_

Form of Payment: \_\_\_\_\_ Public Hearing Set for: \_\_\_\_\_

Date Submitted: \_\_\_\_\_ Decision Date: \_\_\_\_\_  
(stamp) Decision: \_\_\_\_\_