

**TOWN OF SOMERS**  
**ZONING COMMISSION**  
**P.O. BOX 308**  
**SOMERS, CT 06071**

SITE PLAN APPLICATION

APPLICATION FEE: \$185 (\$60 ST fee incl)

**PLEASE TYPE OR PRINT**

**DATE:**

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

LOCATION: \_\_\_\_\_

OWNER OF PROPERTY: \_\_\_\_\_

ZONE: \_\_\_\_\_

**STATE ACTION AND USE REQUESTED:**

**INTENDED USE OF PROPERTY SHOULD APPROVAL BE GRANTED:**

NUMBER OF OFF STREET PARKING SPACES:

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

-----DO NOT WRITE BELOW-----

DATE OF PUBLIC HEARING:

DECISION: