



Town of Andover, CT
Andover Planning and Zoning Commission
17 School Road, Andover CT 06232
860-742-7305

06/07/2022

ZONE CHANGE APPLICATION

22-02

Applicant Information:

Name: Jed Larson Andover Planning and Zoning Commission
Address: 17 School Road
Phone: 860-742-7305 Fax: _____
Email: zoning@andoverct.org
Legal Interest: Planning and Zoning Commission acting on behalf of the town of Andover

Owner Information:

Name: ANDOVER TOWN OF
Address: 17 SCHOOL RD ANDOVER, CT 6232
Phone: 860-742-7305 Fax: _____
Email: _____
☐ Attached is documentation verifying ownership of the property. (Required)

Subject Parcel:

Address: _____
Size: _____ Map, Block and Lot #: _____
Is the subject parcel within 500 ft. of the Town boundary? ☒ yes ☐ no
Zone Change Requested from N/A text amendment to _____

Purpose of Request:

To amend sections 15 (signs) and 17 (alcoholic and cannabis establishments) of the zoning regulations in their entirety.

Fees:

Zone Change Fee = \$ _____ (Payable to the Town)
Amount includes 60.00 State Fee and 15.00 processing fee.

Signatures:

Signature of Owner(s) _____ Date: _____
Signature of Applicant(s) William Jed Larson Date: 6/14/22