

## APPLICATION FOR THE SUBDIVISION OR RESUBDIVISION OF LAND

Submitted Date:.....

### PLANNING & ZONING COMMISSION TOWN OF ANDOVER

Application is hereby made to the town Planning & Zoning Commission for approval of final map entitled:.....

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1. Description of subject parcel, as per Assessor's records:

Map(s) # \_\_\_\_\_ Block(s) \_\_\_\_\_ Parcel(s) \_\_\_\_\_

Zone of subject parcel: \_\_\_\_\_ Number of lots \_\_\_\_\_

Number of acres: .....

2. Describe and give reasons for any variations of the requirements of the Andover Subdivision Regulations in the proposed plans: \_\_\_\_\_

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3. Applicant(s): If more than one use separate sheet.

Name: \_\_\_\_\_ Signature \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Date \_\_\_\_\_

☐ Owner ☐ Options ☐ Buyer ☐ Agent - Check One

4. Owner of Record: If other than applicant, if more than one list on a separate sheet.

Name: ..... Signature .....

Address: .....

Telephone \_\_\_\_\_ Date \_\_\_\_\_

The following shall be included as part of the Application:

- ( ) A copy of deed, deed restrictions, covenants, etc..
- ( ) Statement of Intent regarding future development if owner owns abutting land.
- ( ) Estimate of Municipal Improvements.
- ( ) Sanitary Report and Plan – 5 copies.
- ( ) Boundary Plan – 5 copies.
- ( ) Erosion and Sedimentation Control Plan – 5 copies.
- ( ) Municipal Improvement Plan – 5 copies.
- ( ) Road and Drainage Plan – 5 copies.
- ( ) Topographic Plan – 5 copies.
- ( ) Engineer's Report showing conformance to regulations as to suitability of land.
- ( ) Copies of any variance or special permit concerning this property.
- ( ) Names and postal addresses of all abutting land owners and all landowners within 500' of the subject parcel, according to Tax Assessor's current records.
- ( ) Is any waiver from the "Subdivision Regulations" requested? If so, a letter stating reasons must be submitted.
- ( ) Fee - \$50.00 or \$25.00 per lot, whichever is greater (Connecticut State Statute, as amended). Make checks payable to the "Town of Andover".

Specify amount of fee \$\_\_\_\_\_.

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Record Owner's Signature

Note: If agent signs, a letter of authorization from owner(s) must accompany this application.

FOR OFFICE USE ONLY

Date application received in Town Office: \_\_\_\_\_

Date application received PZC: \_\_\_\_\_

Dates of Legal Notice Public Hearing: \_\_\_\_\_

Date of Public Hearing: \_\_\_\_\_

Agenda Date: \_\_\_\_\_

Date of Final Approval or Denial: \_\_\_\_\_

Date of Final Approval or Denial Legal Notice: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Date of expiration (5 years): \_\_\_\_\_

Date Filed in Land Records: \_\_\_\_\_