

## SPECIAL EXCEPTION APPLICATION

## City of New Britain ZONING BOARD OF APPEALS

1		
	Application #	
	Date:	
	(OFFICE USE ONLY)	

	ZONING DISTRICT:
. APPLICANT: (With Statement of Consent from Property Owner)	DAYTIME PHONE NUMBERS (Required):
NAME:	
ADDRESS:	
	(As Stated in Deed, Recorded in Town Clerk's Office)
E-MAIL:	
CELL:	
	ORDINANCES IS REQUESTED AS AUTHORIZED BY RAGRAPH OF THE ZONING ORDINANCES
. BRIEFLY EXPLAIN HOW THIS APPLICATION COMPL AFEGUARDS OF SECTION 270-40-40:	LIES WITH ALL APPLICABLE GENERAL AND SPECIFIC
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