



Planning Department · Hamden Government Center  
2750 Dixwell Avenue · Hamden, CT 06518  
Phone (203) 287-7070 Fax (203) 287-7075  
www.hamden.com

## TOWN OF HAMDEN APPLICATION TO AMEND THE ZONING REGULATIONS

### INSTRUCTIONS

Below please find a list of the materials to be submitted to the Planning Office. It is the applicant's responsibility to provide all of this information. While Town staff will be happy to answer your questions, they are not responsible for preparing the information or assuring its accuracy. The Hamden Zoning Regulations are available in the Planning Office as well as on-line at [www.hamden.com](http://www.hamden.com).

### DEADLINE FOR APPLICATIONS:

Applications to amend the Zoning Regulations must be submitted by 3:00 pm on the 15<sup>th</sup> of the month to the Planning Office, 3<sup>rd</sup> Floor, Hamden Government Center, 2750 Dixwell Avenue, Hamden, CT 06518 in order to be put on the agenda for the meeting two months later. The regular meetings of the Planning & Zoning Commission are held on the **second and fourth Tuesdays** of each month. Applications will be referred to the appropriate departments and agencies for comments.

### SUBMISSION REQUIREMENTS

**The applicant must make sure to meet all of the requirements listed in Sections 702.7 through 702.10 of the Zoning Regulations**

1. **FEE:** \$380 (subject to change) cash or check payable to the Town of Hamden
2. Submit one (1) original and fourteen (14) copies of the application and any other supporting documentation, stating the specific language to be amended and the proposed language, in accordance with Sections 702.7 through 702.10 of the Hamden Zoning Regulations. **An application is not complete until all of the required materials are submitted.**
3. Applications must:
  - a. Be signed by the party proposing the amendment or by the agent for such party;
  - b. Include fifteen copies of a narrative stating the reason(s) for the proposed amendment.
4. **Notification to the Regional Water Authority (RWA)** – Please complete the attached RWA Notification Form and **send by certified mail to the address shown below**. This notice must be mailed within seven (7) days of the date of the application. Documentation of mailing shall be provided to the Hamden Planning Office.

Environmental Analysts,  
Environmental Planning Department  
Regional Water Authority  
90 Sargent Drive  
New Haven, CT 06511

7. **Notification to the CT Department of Public Health** – Applicants are now required by Public Act No. 06-53 of the CT General Statutes to notify The Connecticut Commissioner of Public Health of the proposed project within seven days of filing. The instructions are on the last page of the application package.
8. **Notice to Town Clerks** – pursuant to *Connecticut General State Statutes Section 8-3b*, **the applicant must provide stamped (not metered) envelopes with completed certified mail tickets addressed to the municipalities identified above:**
  1. Town Clerk of North Haven  
18 Church Street  
North Haven, CT 06473
  2. Town Clerk of New Haven  
135 Church Street  
New Haven, CT 06510
  3. Town Clerk of Cheshire  
84 South Main Street  
Cheshire, CT 06410
  4. Town Clerk of Wallingford  
45 South Main Street  
Wallingford, CT 06492
  5. Town Clerk of Bethany  
40 Peck Road  
Bethany, CT 06525
  6. Town Clerk of Woodbridge  
11 Meeting House Lane  
Woodbridge, CT 06525
9. Revision(s) to the application and any additional information required beyond the original submission must be received in the Planning Office **at least ten (10) days prior** to the Commission's hearing of the application.

## **REVIEW CRITERIA FOR CHANGE TO ZONING REGULATIONS**

In reviewing an application to amend the Zoning Regulations, the Commission will consider such factors as:

- a. The goals, objectives, and recommendations of the Plan of Conservation and Development;
- b. The intent of zoning and of these regulations;
- c. Changes that have taken place in the rate and pattern of development and land use within the Town and adjoining communities;
- d. The impact on the capacity of the present and proposed utilities, streets, drainage systems, and other improvements;
- e. Traffic congestion impacts;
- f. The environmental impacts; and
- g. The health and general welfare of the community.



Date of Filing \_\_\_\_\_  
Fee \_\_\_\_\_  
Date Paid \_\_\_\_\_  
Receipt # \_\_\_\_\_  
Application # \_\_\_\_\_

**TOWN OF HAMDEN  
APPLICATION TO AMEND THE ZONING REGULATIONS**

**Pursuant to Sections 702 – 702.12 of the Hamden Zoning Regulations**

APPLICANT \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
(Name)

ADDRESS \_\_\_\_\_  
(Street No and Name) (Town and State) (Zip Code)

REGULATION TO BE:  AMENDED  ADDED or  DELETED:  
Article Number \_\_\_\_\_ Section \_\_\_\_\_ Group Use \_\_\_\_\_

CURRENT  
LANGUAGE \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROPOSED  
LANGUAGE \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REASON FOR PETITION FOR  
CHANGE \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have there been any previous petitions for same or similar amendments?  YES  NO

If YES, list name of applicant \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_  
(Name)

TELEPHONE NO. \_\_\_\_\_

MAILING ADDRESS

\_\_\_\_\_  
(Street No. and Name) (Town and State) (Zip Code)

**If you require additional space to complete any of your answers, please attach to this document.**

Public Water Supply Watershed/Aquifer  
Project Notification Form  
For The  
South Central Connecticut Regional Water Authority

REQUIREMENT:

All applicants before a municipal Planning and Zoning Commission, Inland Wetlands Commission, or Zoning Board of Appeals for any project located within a public water supply watershed are required by Public Act 89-301 (Sections 8-3i and 22a-42f of the Connecticut General Statutes) to notify the affected public water utility by certified mail within 7 days of the application.

GENERAL INFORMATION:

Maps showing the location of Regional Water Authority (RWA) watershed boundaries are on file with municipal planning and zoning, and inland wetlands staff, and Town Clerks. The applicant's notification to the RWA should include the information requested on pages two through four. The RWA may request additional information if it is determined that a more detailed review is necessary. Attach additional sheets if necessary. Any questions, please call 401-2741, or 401-2743.

Please mail this completed form and attachments to:

Environmental Analysts  
Environmental Planning Department  
Regional Water Authority  
90 Sargent Drive  
New Haven CT 06511

Public Water Supply Watershed/Aquifer  
Project Notification Form  
For The  
South Central Connecticut Regional Water Authority

1. Location map of project site (Please attach; Map can be from sources such as assessor's map or from USGS Quadrangle Map and should show enough detail to locate the site, ie. major intersections etc.).
  
2. Site plans, floor plans, and sediment and erosion control plan which have been submitted to the municipality for review (Please attach).
  
3. Project address \_\_\_\_\_
  
4. Total acreage of project site \_\_\_\_\_
  
5. Existing land use and type of ground cover e.g. forest, pavement, buildings, lawn, meadow etc. Estimate percentage of total acreage for each type of ground cover  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
6. Project description \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
7. Acreage of area to be disturbed including structures, additions, paving, and soil disturbance. Estimate percentages of total lot acreage for each type of ground cover, including those listed in item #5, following development  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
8. Type of sanitary system (Circle one) septic system / public sewer / both / none;
  
9. Number of **existing and proposed** floor drains and their point of discharge e.g. sanitary sewer, holding tank, or ground.  
\_\_\_\_\_

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10. Water accessed through (Circle one) private well public water other none

11. Is public water available to area? Yes No

12. Are there any wetlands or watercourses on the property? If so, describe

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13. Distance of site disturbance to nearest watercourse or wetland \_\_\_\_\_

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14. Brief description of **existing and proposed** stormwater management system, including roof drainage, paved areas etc., and discharge points e.g. municipal system, drywells, streams, vegetated areas, detention basins etc. Attach drainage plans and calculations if available.

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15. Type of heating fuel for facility \_\_\_\_\_

16. List of **existing and proposed** underground or above-ground storage tanks including age, capacity and contents.

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17. List of potentially harmful chemicals stored or used on property (**existing and proposed**) and typical on-site volumes, including but not limited to petroleum products, lubricants, solvents, detergents, and pesticides

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18. Describe any wastes generated and their means of disposal

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19. Location, type, and size of solid waste dumpsters\_\_\_\_\_

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20. Application # and date will be heard by Planning and Zoning Commission

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21. Application # and date will be heard by Zoning Board of Appeals

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22. Application # and date will be heard by Inland Wetlands Commission

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23. Name, address, telephone and fax number, email address of contact person for the project:

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**Name of Person Completing Form**

**Signature**

**Date**

**NEW REQUIREMENT: NEED TO NOTIFY**  
**CONNECTICUT DEPARTMENT OF PUBLIC HEALTH**

**Using Public Water Supply Watershed or Aquifer Area Project Notification Form**

**Note:** All applicants before a municipal Planning Commission, Zoning Commission, Planning and Zoning Commission, Zoning Board of Appeals or Inland Wetlands Commission for **any project located within a public water supply aquifer or watershed area** are now required by Public Act No. 06-53 of the CT General Statutes to notify The Connecticut Commissioner of Public Health of the proposed project within seven days of filing.

To notify the Commissioner of Public Health, you must use the Online Notification Form, which you can find by doing the following:

1. Type in the following URL to access the website:  
**[www.dir.ct.gov/dph/water/web\\_form.htm](http://www.dir.ct.gov/dph/water/web_form.htm)** -- It will take you to the DPH Drinking Water Section web page and the form you need to complete.
2. Answer each question. For Steps 2.1 and 2.2., consult the map in the Planning & Zoning Department to see which one applies. ***Note: If your property lies outside the public water aquifer and watershed areas, you do not need to fill out the online form.***
3. For Step 2.3, the PWSID number is: **0930011**
4. Print a copy of the completed form and submit to the Planning and Zoning Department with your application.
5. If you have any questions or problems concerning the website contact the Department of Public Health staff at: **(860) 509-8000**.