



Fee Schedule

Government Center · 888 Washington Boulevard · Stamford, CT 06904-2152 Phone: 203.977.4719 · Fax: 203.977.4100

APPLICATION FOR TEXT CHANGE OF THE STAMFORD ZONING REGULATIONS

Complete, notorize, and forward thirteen (13) hard copies and (1) electronic copy in PDF format to Clerk of the Zoning Board with a \$1,000.00 Public Hearing Fee and the required application filling fee (see Fee Schedule below), payable to the City of Stamford.

NOTE: Cost of required Public Hearing advertisements are payable by the Applicant and performance of mailing of required property owners is the sole responsibility of the applicant. **LAND RECORDS RECORDING FEE**: \$60.00 for First page - \$5.00 for each additional page)

	Minor Text Change	\$1,060.00	
	Major Text Change	\$5,060.00	
APPLICANT NAME (S): CITY OF STAMFORD ZONING BOARD			
APPLICANT ADDRESS: 888 WASHINGTON BOULEVARD, STAMFORD, CT – 06901			
APPLICANT PHONE #: <u>203-977-4711</u>			
IS APPLICANT AN OWNER OF PROPERTY IN THE CITY OF STAMFORD? NO			
LOCATION	OF PROPERTY IN STAMFORD OWNED BY APPLICANT (S): N/A		
PROPOSE	D TEXT CHANGE:		
AS PART (OF THE OMNIBUS TEXT CHANGES, CLEAN-UP 3 PROPOSES TO REORGANIZE THE CITY OF	F STAMFORE) ZONING
	IONS, CLARIFY CERTAIN DEFINITIONS PROCEDURES, UPDATE AND ADD NEW DEFINITION		
ZONING D	ISTRICTS AND DELETE CERTAIN SECTIONS. SEE ATTACHED NARRATIVE AND TEXT FOR	ALL AMEND	<u>/IENTS.</u>
DOES ANY PORTION OF THE PREMISES AFFECTED BY THIS APPLICATION LIE WITHIN 500 FEET OF THE BORDER LINE WITH GREENWICH, DARIEN OR NEW CANAAN?NO(If yes, notification must be sent to Town Clerk of neighboring community by registered mail within 7 days of receipt of application – PA 87-307).			
NOTE: Ap Stamford I	SIGNED:	2022 of referral to lat least thre	the
STATE OF	CONNECTICUT		
	ss STAMFORD 20	22	_
Personally	appeared before me sometimes the contents thereof, before me	JUDGE tate of Conn	ecticut
FOR OFFI	CE USE ONLY	***************************************	
APPL. #: _	Received in the office of the Zoning Board: Date:		
	Ву:		