

APPLICATION FOR COASTAL SITE PLAN REVIEW

(Please print or type)

PROJECT LOCATION: _____

PROPERTY OWNER: _____

APPLICANT NAME: _____

ADDRESS: _____

PHONE: () _____

CONTACT FOR QUESTIONS: _____

ACREAGE OF PROJECT PARCEL: _____

SQUARE FEET OF PROPOSED BUILDING: _____

ZONING DISTRICT OF PROJECT PARCEL: _____

PROJECT DESCRIPTION: _____



Coastal resources on which the project is located or which will be affected by the project:
(See "Index of Policies" Planning Report 30)

Coastal policies affected by the project:
(See "Index of Policies" Planning Report 30)

- _____ a. bluffs or escarpments
- _____ b. rocky shorefront
- _____ c. beaches and dunes
- _____ d. intertidal flats
- _____ e. tidal wetlands
- _____ f. freshwater wetlands
- _____ g. estuarine embayments
- _____ h. coastal flood hazard areas
- _____ i. Coastal erosion hazard area
- _____ j. developed shorefront
- _____ k. islands
- _____ l. coastal waters
- _____ m. shorelands
- _____ n. shellfish concentration areas
- _____ o. general resource
- _____ p. air resources

- _____ a. water dependent uses
- _____ b. ports and harbors
- _____ c. coastal structures & filing
- _____ d. dredging & navigation
- _____ e. boating
- _____ f. fisheries
- _____ g. coastal recreation access
- _____ h. sewer & water lines
- _____ i. energy facilities
- _____ j. fuel, chemicals & hazardous materials
- _____ k. transportation
- _____ l. solid waste
- _____ m. dams, dikes & reservoirs
- _____ n. shellfish concentration
- _____ o. general development
- _____ p. open space

If the project is adjacent to coastal waters, is the project water dependent? (See C.G.S. sec. 22a-93)
_____ Yes _____ No _____ Not Applicable

If yes, in what manner?

- _____ Docks, piers, etc.
- _____ Industrial process or cooling waters
- _____ General public access
- Other, please specify: _____

What possible adverse or beneficial impacts may occur as a result of the project?
(Attach additional sheet if necessary)

How is the proposal consistent with all applicable goals and policies of the CAM Act?

What measures are being taken to mitigate adverse impacts and eliminate inconsistencies with the CAM Act?
(Attach additional sheet if necessary)

Applicant Signature: _____