

Town of Montville Planning & Zoning Commission
Site Plan or Special Permit Application

Site Plan Number _____ Plan Date _____
Revision _____

Special Permit Fee paid _____ Revision _____

Assessors Map 002 Lot 005-00B
Project Address 2 Enterprise Lane, Oakdale, CT, 06370

Name of Applicant John Dempsey - Homes R Us
Address of Applicant 93 North Burnham Highway, Lisbon, CT, 06351
Project Name PVC Direct Site Plan
Tel # 860-800-4089 Cell# _____
Fax # _____ Email jdhomesrus@gmail.com
Name of Property Owner Homes R Us LLC
Name of Attorney _____
Tel # _____ Cell# _____
Fax # _____ Email _____
Name of Engineer Green Site Design - Ellen Bartlett
Tel # 860-892-1380 Cell# _____
Fax # _____ Email ebartlett@greensitedesignllc.com

Zoning District L1 Lot Size 40,976 SF Total Acres 0.94 Acres
 Yes No Regulated Wetlands Acreage _____ Permit Date _____
 Yes No Flood Plain Flood Hazard Area _____
 Yes No A-2 Survey Name of Surveyor Ryan Cheverie
Building size 7,500 s.f. Building height 28.5 ft
Number of acres to be disturbed 0.93
Applicable Zoning Regulation(s) _____
Project description New warehouse

This project will use:

- Septic system Municipal sewer
 Individual well Public water supply well SCWA well Municipal water

- Yes No This project is located in a **Public Water Supply Watershed**
 Yes No This project has received approval from the Uncas Health District
 Yes No This project has received approval from the appropriate Water Authority

**** Attach Copy of All Approvals**

Yes No This project requires a State General Stormwater Quality Permit.
 Registration # _____
 Yes No This project requires a permit from the Army Corps of Engineers.
 Yes No This project requires a Water Diversion Permit.
 Yes No This project requires a Dam Permit.
 Yes No This property is subject to a Conservation Restriction and/or a
 Preservation Restriction. If yes, attach a copy of certified notice.
 Yes No Drainage calculations submitted:
 Date _____ Rev. date _____ Rev. date _____

Yes No This project requires a OSTA (Office of State Traffic Commission)
 Permit.
 Yes No This project requires a DOT Encroachment Permit.
 Yes No The plan has been submitted to the DOT District 2 Office.
 Number of parking spaces provided ¹⁴ _____
 Number of vehicle trips per day generated by this project _____

Yes No A determination of applicability of of the following Zoning Regulations
 Sections _____

Signature of Applicant *[Signature]* Member Date 2/15/23
 Signature of Owner *[Signature]* Member James Zille Date 2/15/23

OFFICE USE ONLY

Review	Date Sent	Date Received
Town Engineer		
Uncas Health District		
Fire Marshal		
Building Official		
Mayor		
WPCA		
DOT District 2		
N.L. Water		
Other		

Date of Receipt _____ Date of Public Hearing _____ Date Hearing Closed _____
 Date of Extension #1 _____ Date of Extension # 2 _____ Terminal Date _____