Town of Montville Planning & Zoning Commission <u>Site Plan or Special Permit Application</u>

X	Site Plan	Number		
			Revision	
	Special Permit	Fee paid	Revision	
	N074	1.4 002-000		
		Lot 002-000	— h-New London Turnpike)	
110je	ct Address <u>400 RO</u>	ace 32 (NOIWIC	ii-New Holldoll Tullipike)	-
Name	e of Applicant KDS	Realty, LLC (F	Principal - Sudesh Kumar)	
			Rd, Durham, CT 06422	
			office use in existing comm	
Tel#	203-317-7918	(Cell# <u>203-317-7918</u> buil	dir
Fax #	<u></u>	Email_skumarc	lvm@gmail.com	
			C (Same as Applicant)	
Name	e of Attorney <u>N/A</u>			
Tel#		(Cell#	
Fax #	!	Email	ture Desirid Markey	
Name	e of Engineer Boun	daries LLC (at	tn: David McKay)	
Tel#	860-376-2006		Cell#	
Fax #	<u>860-376-5899</u>	Email <u>dmckay</u>	@boundariesllc.net	
☐ Y ☐ Y Build Numl Appli Proje wit	es No Flood Plai es No A-2 Surve ling size 2,701 ber of acres to be districable Zoning Regula ct description Impr h building ad rnight stays	n Flood Ha ey Name of s.f. Building urbed 0.10 ac tion(s) 14A.3.a, 1 ovements to su dition for acc from surgery.	O.92 Total Acres 0.92 N/A Permit Date N/A Divide Acres N/A Surveyor Boundaries LLC height Existing three-story O.2.3, 10.2.8 pport veterinarian office spessory indoor kennel to support three apartment units 1 also be renovated.	- - pac
So In Yable Y	es No This pro es No This pro es No This pro es No This pro	ject has received appro	vell □ SCWA well ☑ Municipal water lic Water Supply Watershed val from the Uncas Health District val from the appropriate Water Authority	
Connecti	lons		Tr r	
** A 1	ttach Copy of All Ap	provals		

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Site Plan /Special Permit Application

☐ Yes ☒ No This	s project requires a permit fro s project requires a Water Div s project requires a Dam Perm s property is subject to a Cons		
☐ Yes ☒ No This ☐ Yes ☒ No This ☐ Yes ☒ No This ☐ Pres	s project requires a Water Div s project requires a Dam Perm	version Permit.	
☐ Yes ☒ No This ☐ Yes ☒ No This Pres	s project requires a Dam Pern		
☐ Yes ☑ No This Pres		nit	
Pres	s property is subject to a Cons		
		attach a copy of certified notice.	
☐ Yes ☒ No Dra	inage calculations submitted:		
		Rev. date	
☐ Yes ☒ No This	s project requires a OSTA (O	ffice of State Traffic Commission)	
Peri	mit. The project use	s an existing commercial	drivewa
☐ Yes ☒ No This	s project requires a DOT Enci	roachment Permit. curb cut, no	activit
		he DOT District 2 Office. in ROW.	
Number of parking spaces p	rovided 22	Office: 10 trips per 1,0	00 SF
Number of vehicle trips per	day generated by this project	Apartment: 7 trips per u	nit
		Total Trips: 48 trips pe	
☑ Yes ☐ No A de	etermination of applicability	of of the following Zoning Regulations	
	tions 17.4.15		
Signature of Applicant Signature of Owner	- om	Date 10 8 24 Date 10 8 24	
	-cm	Date 10/8/24 Date 10/8/24	
Signature of Owner	Date Sent	Date 10/8/24 Date 10/8/24 Date Received	
OFFICE USE ONLY		Date 10/8/24	
OFFICE USE ONLY Review		Date 10/8/24	
OFFICE USE ONLY Review Town Engineer		Date 10/8/24	
OFFICE USE ONLY Review Town Engineer Uncas Health District		Date 10/8/24	
OFFICE USE ONLY Review Town Engineer Uncas Health District Fire Marshal		Date 10/8/24	
OFFICE USE ONLY Review Town Engineer Uncas Health District Fire Marshal Building Official		Date 10/8/24	
OFFICE USE ONLY Review Town Engineer Uncas Health District Fire Marshal Building Official Mayor		Date 10/8/24	
OFFICE USE ONLY Review Town Engineer Uncas Health District Fire Marshal Building Official Mayor WPCA		Date 10/8/24	

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