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

図	Site Plan	Number						
			Revision					
	Special Permit	Fee paid	Revision					
		Lot 34, 35 & 36						
Proj	Project Address 2268-2284 Route 32 (three parcels) Name of Applicant Honeycomb Real Estate Partners, LLC (Attn. Lewis Brown)							
Address of Applicant 20 Avon Meadow Lane, Avon, CT 06001 Project Name Horizon View								
_	#_(908) 868-472		Cell# N/A					
	#_N/A		@honeycombre.com					
Name of Property Owner Samuels Montville, LLC								
Nan	ne of Attorney _ W	illiam R. Sweeney, E	sq.					
	# (860) 447 - 03	35	Cell# N/A					
	# <u>N</u> /A	Email wrswe	eney@tcors.com					
		<u>rjan P. Dundon, PE</u>						
	# <u>(781) 279-01</u>		Cell# N/A					
Fax	#_ N/A	Email_brian.de	undon@rjoconnell.com					
7 an	ing District C 1 (Pouto 32 O7\ I at Siz	e 148,322 SF Total Acres 3.41 acres					
	iing District <u>C-1 (</u> Yes □ No Regula		e 0.026 acres Permit Date pending					
	Yes 🛛 No Flood		azard Area N/A					
	Yes D No A-2 St		f Surveyor Tom S. Hesketh, L.S.					
	lding size 60,148	•	g height 48', 8.5"					
		disturbed 3.41 acres						
			Route 32 Overlay Zone (OZ)					
Project description Construction of a 57-unit multi-family residential project with paved								
parking and stormwater management features.								
This	s 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 Dril	olie Water Supply Watershed					
			olic Water Supply Watershed oval from the Uncas Health District					
			oval from the offices Health District					
•••••	. CO pag 140 11115	project mas received appro	ovar from the appropriate water rumontly					
** A	Attach Copy of All	Approvals						

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	Yes	Ø	No	This project requires a State General Stormwater Quality Permit.					
	Yes	স	No	Registration # This project requires a permit from the Army Corps of Engineers.					
	Yes			This project requires a permit from the Army Corps of Engineers. This project requires a Water Diversion Permit.					
	Yes			This project requires a Water Diversion Fermit. This project requires a Dam Permit.					
	Yes			This property is subject to a Conservation Restriction and/or a					
	1 03	Ж	110	Preservation Restriction. If yes, attach a copy of certified notice.					
Yes No Drainage calculations submitted:				copy of contract money.					
		Rev. date							
	Yes	×	No	This project requires a OSTA (Office of State Traffic Commission)					
Permit.									
	Yes			This project requires a DOT Encroachment Permit.					
	Yes			The plan has been submitted to the DOT	District 2 Office.				
	Number of parking spaces provided 132								
Νu	ımbei	of	vehicle trips	per day generated by this project 259 (w	eekday), 282 (weekend)				
	☐ Yes ☒ No A determination of applicability of of the following Zoning Regulations Sections								
Signature of Applicant Signature of Owner Date Date									
OFFICE USE ONLY									
,	eviev			Date Sent	Date Received				
T	own	Eng	gineer						
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									
Da	Date of Extension #1 Date of Extension # 2 Terminal Date								

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