



# CITY OF DANBURY

155 DEER HILL AVENUE  
DANBURY, CONNECTICUT 06810

## PLANNING & ZONING DEPARTMENT

(203) 797-4525

(203) 797-4586 (FAX)

### FIRST DIVISION CHECKLIST FOR SUBMISSION AND PROPERTY OWNER ACKNOWLEDGEMENT FORM

Date of Submittal \_\_\_\_\_ Fee of **\$125** Paid \_\_\_\_\_

Property Owner \_\_\_\_\_ Phone \_\_\_\_\_

Agent (if any) \_\_\_\_\_ Phone \_\_\_\_\_

Property Address \_\_\_\_\_

A-2 Survey Date \_\_\_\_\_ Tax Assessor Lot # \_\_\_\_\_

### SUBMIT ORIGINAL A-2 SURVEY MYLAR AND 3 PAPER COPIES, SIGNED AND SEALED BY A SURVEYOR LICENSED IN THE STATE OF CONNECTICUT

Survey must conform to the standards of a Class A-2 Survey and include the following information. All lots must conform to the City of Danbury Zoning Regulations.

(Check to confirm the information is provided on the survey)

- \_\_\_ dimensions of lot to be divided;
- \_\_\_ dimensions of both resulting lots including metes and bounds;
- \_\_\_ existing zoning district(s);
- \_\_\_ zoning standards for frontage;
- \_\_\_ lot area;
- \_\_\_ minimum square, if required must be located behind front yard setback;
- \_\_\_ front yard;
- \_\_\_ side yards;
- \_\_\_ rear yards;
- \_\_\_ driveway access to a public street;
- \_\_\_ all existing houses and other structures, well(s), and septic and reserve areas.

Is deed of existing lot attached? \_\_\_\_\_ Does the deed contain legal description of existing lot? \_\_\_\_\_

**ALL APPLICATIONS MUST INCLUDE AN AFFIDAVIT ATTESTING THAT THE LOT TO BE SPLIT EXISTED PRIOR TO JUNE 3, 1958. ALL TITLE SEARCH RESEARCH MATERIALS MUST BE SUBMITTED.**

**THE DEPARTMENT OF PLANNING & ZONING MAY REQUEST ADDITIONAL INFORMATION AS IT DEEMS NECESSARY, IN ITS SOLE DISCRETION, TO PROCESS THIS REQUEST FOR A FIRST DIVISION OF LAND.**

## PROPERTY OWNER ACKNOWLEDGEMENT

I acknowledge all the above information is true and has been submitted as required. Furthermore, I agree that upon recording of the approved mylar, and the deed, on the Danbury Land Record, I shall submit a copy of the receipt to the Department of Planning and Zoning for its files.

Printed Name of Property Owner \_\_\_\_\_

Telephone Number for Contact \_\_\_\_\_

Signature of Property Owner \_\_\_\_\_

Signature of Agent \_\_\_\_\_

Date \_\_\_\_\_

*Applicants are advised to consult a private attorney for legal advice regarding a First Division of property.*

**PLEASE NOTE THAT PRIOR TO THE DEPARTMENT OF PLANNING AND ZONING ENDORSEMENT OF APPROVAL ON THE MYLAR, SAID MYLAR WILL BE FORWARDED TO THE CITY OF DANBURY DEPARTMENT OF HEALTH AND HUMAN SERVICES TO REVIEW FOR COMPLIANCE WITH THE APPLICABLE REGULATIONS AND TECHNICAL STANDARDS OF THE STATE OF CONNECTICUT PUBLIC HEALTH CODE. YOU MAY BE CONTACTED BY THE CITY DEPARTMENT OF HEALTH AND HUMAN SERVICES FOR ADDITIONAL INFORMATION.**

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**DO NOT WRITE BELOW THIS LINE – FOR DEPARTMENT OF PLANNING & ZONING USE ONLY**

Application Number \_\_\_\_\_

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date Approved \_\_\_\_\_

Recording Information: Volume Book & Page Number; Town Clerk Map Number \_\_\_\_\_