

Route Sheet

Page 1 – Complete owner of record and construction site information

Page 2 –Zoning application – complete and sign

Page 3 – can be used for a plot plan or attach your own plot plan. Plot plan needs to show all buildings on property, location of well and septic and all setbacks

Page 4 – information on setbacks

Page 5 – Torrington Area Health District application – complete and sign

Pages 6-8 – Pertain to installing/changing driveway – only complete and sign if it applies

Checks required:

1. Town of Canaan - \$85.00 for zoning permit
2. TAHD - \$35.00/\$55.00 which ever is applicable for Torrington Area Health District application
3. Town of Canaan - \$135.00 for Inland/Wetlands – only if applicable.

Please leave completed forms with appropriate checks with Linda Paviol. Once received, all applications will be sent to the appropriate departments and signature sign-offs will be obtained. Linda will contact owner/applicant when the route sheet is complete and ready to move forward with building permit(s).

Please leave a contact number of applicant/owner in case of questions regarding project.

OWNER(S) OF RECORD:

CONSTRUCTION SITE:

ROUTE SHEET (To obtain a Building Permit)

Name _____

Street _____

Address _____

Tax Map No. _____ Tax Map Lot No. _____

SUBDIVISION:

Tel _____ Fax _____

Name _____ Lot No. _____

DATE: _____
PERMIT NO. _____

The Building Official shall submit this building permit Route Sheet to the Town of Canaan with his monthly report.
THERE ARE NO EXCEPTIONS.

It is the responsibility of the OWNER OF RECORD to: 1) have this form completed IN TOTAL by the respective officials; and 2) completed form MUST be submitted to the BUILDING OFFICIAL PRIOR to the issuance of a Building Permit.

PERMITS/APPROVALS (required to qualify for a Building Permit)

AGENCY

Driveway Permit Application

(A copy of the approved permit form must be attached hereto.)

☐ New driveway, permit required

☐ Existing driveway, no permit required.

Timothy Downs

860 824-7239, or
Henry W. Todd

860 824-0707

CONTACT

DATE

FEE

PAYMENT

SIGNATURE

Tax Collector

Delinquent taxes owned? ☐ Yes ☐ No

Rebecca Derungs

860 824-0707

N/A

Torrington Area Health

1. Septic System
2. Well Water Test

*Per Torrington Area Health Fee Schedule

860 824-0707

860 489-0436

Julie Prue

* \$
* \$

Housatonic River Commission

(properties within River Corridor)

Floodplain ☐ Yes ☐ No

Ellery 'Woods' Sinclair

860 824-7454

N/A

Inland/Wetlands/Conservation Com.

Floodplain ☐ Yes ☐ No

Ellery 'Woods' Sinclair

860 824-7454

\$135.00

Zoning Permit

1988 Flood Plain Ordinance ☐ Yes ☐ No

Boundary Change ☐ Yes ☐ No

Fire Marshal Approval

Single and Double dwellings exempted.

Tom Scott

Zoning Enforcement Officer

860-248-0802

Stanley McMillan

860 364-0909

\$85.00

\$

N/A

Building Permit

Hours: 9-10:30 AM

* Canaan Ordinance

James Clarke,

Building Inspector

860-824-3132 Ext. 191

e

TOWN OF CANAAN, CONNECTICUT

ZONING PERMIT APPLICATION

No. _____

Date: _____

Application is hereby made to the Planning & Zoning Commission for a permit to:

() Construct () Enlarge () Alter () Move Other: _____
the building described below:

Name of Owner: _____ Address: _____

Name of Applicant: _____ Address: _____

Name of Contractor: _____ Address: _____

Zone: _____ Width of Lot: _____ Depth of Lot: _____ Area of Lot: _____

Location of Property: _____

Development: _____ Tax map page _____ Lot # _____

USE OF BUILDING OR ADDITION

Dwelling for _____ Families () Accessory () Other _____

Business _____ Industrial _____ Other _____

Size of bldg/addition _____ Area _____ Habitable floor area _____ Stories _____

Additional information, remarks: _____

NOTE: A Building and Sewage Permit must be secured in addition to this Zoning Approval before any construction is started.

Date: _____ Applicant's signature: _____

Approved Zoning Officer: _____ Date: _____

Approved Building Inspector: _____ Date: _____

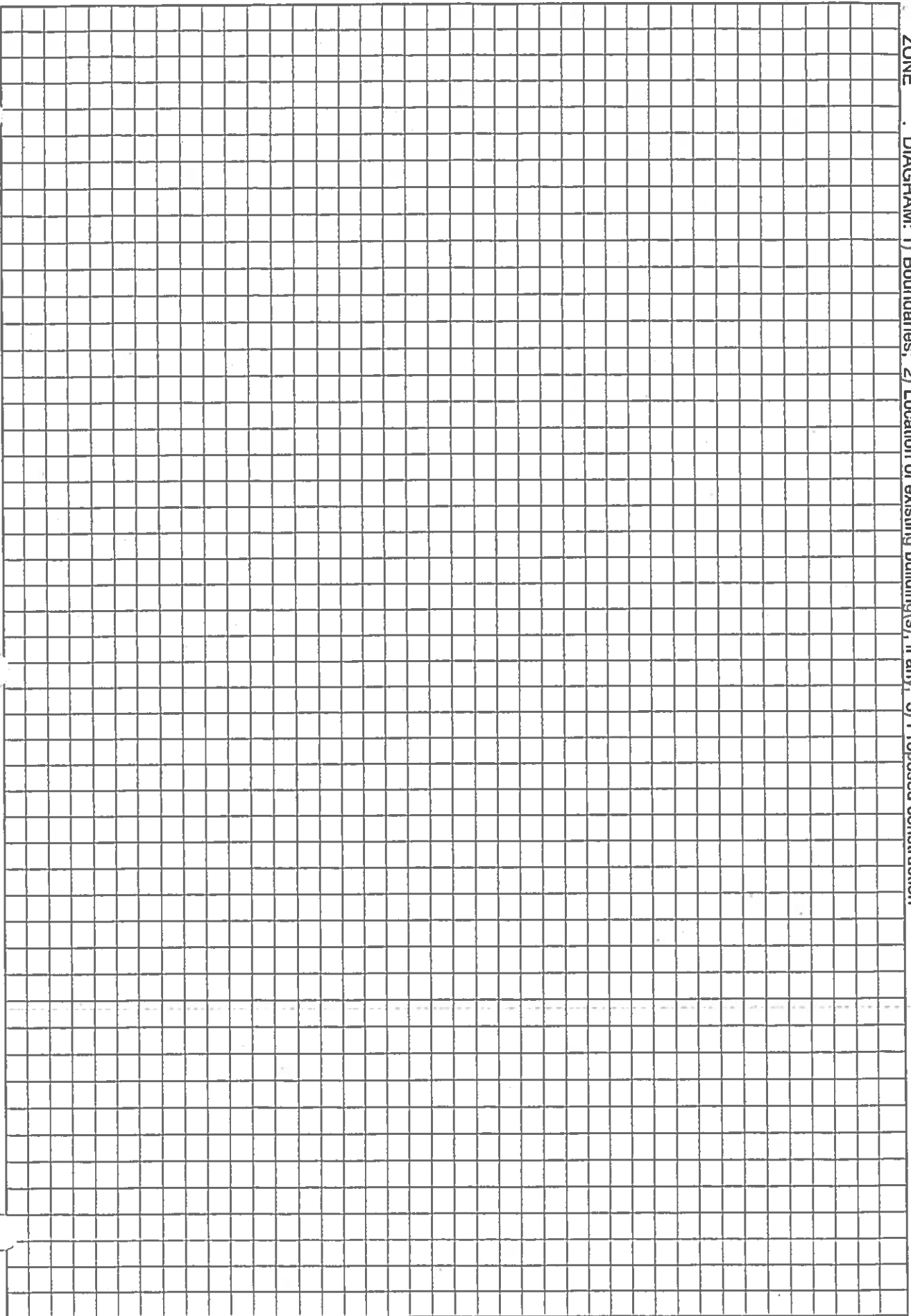
Approved Sanitarian: _____ Date: _____

Approved for Occupancy-Zoning Officer _____ Date: _____

Rejected by: _____ Date: _____

Reason: _____

ZONE . DIAGRAM: 1) Boundaries; 2) Location of existing building(s), if any; 3) Proposed construction



2.5. Dimensional Standards

| | Village Residential | Residential/ Agricultural | Mountain Residential |
|--|------------------------|------------------------------|-------------------------|
| <u>Minimum Lot Size</u> | | | |
| Single Family | 20,000 SF | 80,000 SF | 160,000 SF |
| Two-Family | 30,000 SF | 120,000 SF | |
| <u>Minimum Frontage</u> | | | |
| Single Family | 100 feet | 200 feet | 300 feet |
| Two-Family | 150 feet | 300 feet | |
| <u>Minimum Yard Setbacks</u> | | | |
| Front Yard | 30 feet | 50 feet | 50 feet |
| Side Yard | 10 feet | 25 feet | 50 feet |
| Rear Yard | 30 feet | 50 feet | 50 feet |
| <u>Maximum Building Standards</u> | | | |
| Maximum Building Height – Principal Building | 35 feet | 35 feet | 35 feet |
| Maximum Building Height – Accessory Building | 25 feet | 25 feet | 25 feet |
| Maximum Building Coverage | 20% | 10% | 5% |



TORRINGTON AREA HEALTH DISTRICT

350 Main Street ♦ Suite A ♦ Torrington, Connecticut 06790

Phone (860) 489-0436 ♦ Fax (860) 496-8243 ♦ E-mail info@tahd.org ♦ Web Address www.tahd.org

Addition Application

This is not a building permit.

You must obtain a permit from the Building Inspector prior to any construction.

Owner

Address of Proposed Addition

Town

Owner Address

Town

CT

ST

Zip

Owner Telephone

Existing Records?

Septic Permit Number:

Lot Size:

Information Supplied By:

Septic Sytem Designed By:

The application **must** be accompanied by a **check** made payable to **TAHD** in the amount of:

ACCESSORY STRUCTURE : \$35.00

HABITABLE STRUCTURE: \$55.00

WELL AND SANITARY SEWER: \$35.00

(Return Check Fee on any item: \$25.00)

Application shall be accompanied by a **SKETCH** (on back) showing the relative distances

from the proposed addition to the well and septic system.

Size of
Addition

☐ "field investigation"

Description
of Addition

Signature of Applicant:

Date

TAHD USE ONLY BELOW LINE

☐ **APPROVED**

☐ **DENIED**

Sanitarian:

Decision Date:

***GENERAL INSTRUCTIONS FOR PERMIT
TO DEVELOP/IMPROVE ACCESS TO SITE**

1. The width of any entrance or exit shall not be less than 10 feet or exceed 20 feet, measured parallel to the direction of the highway except as otherwise may be designated by the Town's Inspector.
2. The grade of entrances and exits shall exactly match the edge of the shoulder.
3. Drainage discharged from the highway or flowing along it within the right-of-way shall not be altered or impeded and the applicant must provide, at his expense, suitable structures for drainage as directed by the Town's Inspector.
4. All entrances and exits shall be so located that vehicle operators approaching or using them will be able to obtain adequate sight distances in both directions along the highway. All slopes shall be stabilized by the permit applicant by seeding or other method approved by the inspector.
5. All driveways that slope toward a highway where eroded material may wash onto the highway shall be paved on the entire section within the highway right of way with black top or concrete or other material approved by the Inspector. The remainder of the area, graded to drain to the highway, shall be stabilized to prevent erosion and washing material onto the highway. The pavement shall be joined in a straight line at the intersection with the Town's highway and shaped to accommodate highway drainage.
6. The permittee will be required to construct, at his sole expense, a bituminous or concrete apron, extending at least five feet beyond the outer edge of the shoulder. The purpose of this is to avoid structural damage to the shoulder edge by traffic when it passes from the hardened shoulder of the highway to a softer driveway surface.
7. All driveways which have a minus grade away from the highway shall be graded to a specified gutter grade and ramped upward 6" above the gutter and this area paved sufficiently far back to prevent erosion and allow for the acceptance of highway water.
8. The drainage facility installed under any filled area must be adequate to carry the water along the highway.
9. Where a private driveway has been constructed to intersect with a Town Highway, the Town shall not be responsible for any future flow of water down said driveway.
10. Sketch map required on all applications. A more detailed map will be required if wetlands are involved.
11. Permit is issued only for described work; for any further improvement a new permit must be obtained.

Read and acknowledged by applicant this _____ day of _____, 20__.

Applicant's (or Agent's) Signature _____

Printed Name _____

*There may be additional special instructions and conditions for specific applications.

PERMIT TO IMPROVE ACCESS TO PROPERTY APPLICATION

This permit is issued for the purpose of executing the necessary work to be described.

NOTE: I/we agree to indemnify and hold harmless the Town of Canaan (Falls Village), CT for injury to persons or property arising out of the operation covered by this permit, which conditions are accepted by this applicant. This agreement is pursuant to the ORDINANCE OF THE TOWN OF CANAAN, adopted October 26, 1971, and is on file in the Office of the Clerk of the Town of Canaan.

NAME / ADDRESS / PHONE _____

NAME OF STREET OR HIGHWAY: _____

DETAILED LOCATION OF WORK TO BE DONE, AND A DESCRIPTION:

ANY SPECIAL CONDITION TO BE NOTED (if applicable):

1. Driveway will be installed in accordance with construction details provided by _____

_____ plan (copy of excerpt attached hereto and made a part hereof).

2. For purposes of executing a subdivision development plan no other access is authorized to and from the town highway shown as _____ on the above-referenced survey map.

Applicant's/Authorized Agent's signature)

(Applicant's/Authorized Agent's printed name)

(Date)

APPLICATION FEE: \$25.00 (Checks shall be made payable to Treasurer, Town of Canaan.)

APPLICATION AND SITE REVIEWED:

1. DRIVEWAY SITE PLAN APPROVAL - (flag the entrance)

Public Works Manager

2. INLAND/WETLANDS COMMISSION (map required if wetland involved)

Chairman, Inland/Wetlands Commission

3. PLANNING & ZONING COMMISSION and/or ZONING ENFORCEMENT OFFICER

Zoning Enforcement Officer

4. DEPARTMENT OF PUBLIC WORKS:

- a. WORK SATISFACTORILY COMPLETED AND INSPECTED -

Public Works Manager

- b. WORK INCOMPLETE OR UNSATISFACTORY, PERMIT REVOKED

Selectman

4. BOARD OF SELECTMEN

First Selectman

Selectman

Selectman

Original of this application will be kept on file in the Canaan Town Hall, 108 Main Street, Falls Village, CT