Town of East Lyme

ADDITO	ATTONITOD	CDECTAL	DEDIKE
APPLIC	ATION FOR	SPECIAL	PERMII

Date of Application: 2/1	3/2022		Zone	·		
Applicant's Name:St	eve Turn	er				
Applicant's Address: _58	1 Sandy	Hollow Ro	d, My	stic CT 06355Te	lephone: <u>(860</u>)) 857-9013
Location of Affected Pres	nises: <u>3</u>	74 Main S	t	Assessor's N	/lap/Block/Lot:	
Owner of Record: Ste	ve Turne	r		Volume/Page:	942/485	
Owner's Address:sar	ne as abo	ve		Telephone:	(860) 857-	-9013
DESCRIPTION OF SPECIOTHER applicable Zoning Regression of the Permit is subject to }:	<u>AL PERM</u> gulations o	IIT REQUE of the Town	ESTE	2 {Requires compliance with Zonist Lyme; also state which sections	ng Regulations . s of Zoning Regu	24, 25 & 9 and all llations Special
Renewal of Special Permit Apconditions: A. No outdoor entertainment		K	Dining	at the above referenced premises with	the following pre	eviously approved
B. No speakersC. Last seating at 10:00 p.m.D. 1 year permit						
Signature of Owner/Appl	cant:	\sim				
Attach a true copy of the I plan demonstrating complia	Deed and a	a Site Plan ll applicabl	{10 c	opies required. A copy of the ding code requirements must accom	eeds for all affeon	cted properties and a si
Application for Public Notic	e must be	submitted.		c notice sign (Section 25.4.3-1).		
		Bel	low th	is line for Office Use Only:		
**************************************	****** NO	*****	****	**************************************		******
125	110			OUTDOOR DINING REN		\$20.00
Site Plan Attached:	YES	NO N	J/A	SITE PLAN FEE	\$200.00	<u>\$20.00</u>
				STORM WATER	\$200.00	
(Lillzis) CHECK #: 16142				STATE FEE:		\$60.00
CHECK #: 1014				TOTAL DUE:		\$ \$80.00
Date Approved:				Date Denied:		
Approval subject to condit						
2.						
Approval to become effect premises as described in th	ive upon pu is applicati	ıblication an	nd date	of entry into the land records of the	Гоwn of East Lym	ne affecting the
Date:	Attes	t		Zoning Chairman		
		East	Lyme	Zoning Chairman		

