

Town of East Lyme

APPLICATION FOR SPECIAL PERMIT

Date of Application: 2/15/23 Zone: _____

Applicant's Name: Eduardo Martone

Applicant's Address: 350 Brownstone Ridge, Meriden, CT 06451 Telephone: (203)631-4312

Location of Affected Premises: 11 E Pattagansett Rd Assessor's Map/Block/Lot: 11.2/150

Owner of Record: Darm & K LLC Volume/Page: 944/301

Owner's Address: same as above Telephone: (203) 631-4312

DESCRIPTION OF SPECIAL PERMIT REQUESTED {Requires compliance with Zoning Regulations 24, 25 & 9 and all other applicable Zoning Regulations of the Town of East Lyme; also state which sections of Zoning Regulations Special Permit is subject to}:

Renewal of Special Permit Application for Outdoor Dining at the above referenced premises with the following previously approved conditions:

- A. No outdoor entertainment is allowed
- B. Last seating on weekdays is at 8:00 p.m., outdoor patio to close at 9:00 p.m.
- C. Last seating on weekends is at 9:00 p.m., outdoor patio to close at 10:00 p.m.
- D. Low level speakers allowed for background dining music.
- E. 1 year permit

Signature of Owner/Applicant: Eduardo Martone

Attach a true copy of the Deed and a Site Plan {10 copies required}. A copy of the deeds for all affected properties and a site plan demonstrating compliance with all applicable zoning code requirements must accompany this application.

Proof of posting of Special Permit Application public notice sign (Section 25.4.3-1). Proof of posting of the Special Permit Application for Public Notice must be submitted.

Below this line for Office Use Only:

Deed Copies Attached:	YES	NO	PERMIT FEE: SPECIAL PERMIT FEE	\$150.00	_____
			OUTDOOR DINING RENEWAL	\$20.00	<u>\$20.00</u>
Site Plan Attached:	YES	NO	N/A	SITE PLAN FEE	\$200.00 _____
				STORM WATER	\$200.00 _____
				STATE FEE:	<u>\$60.00</u>
CHECK #:	<u>1059</u>			TOTAL DUE:	\$ <u>\$80.00</u>

Date Approved: _____ Date Denied: _____

- Approval subject to conditions below:
- _____
 - _____

Approval to become effective upon publication and date of entry into the land records of the Town of East Lyme affecting the premises as described in this application.

Date: _____ Attest _____

East Lyme Zoning Chairman