

# Town of East Lyme

## APPLICATION FOR SPECIAL PERMIT

Date of Application: February 15, 2023 Zone: \_\_\_\_\_

Applicant's Name: TIHT, Inc., dba Family Pizza

Applicant's Address: 233 Main Street, Niantic, CT 06357 Telephone: (860) 739-0466

Location of Affected Premises: 233 Main St Assessor's Map/Block/Lot: 12.1/110

Owner of Record: HAR-TRI, LLC Volume/Page: 1009/0141

Owner's Address: 233 Main St, Niantic CT 06357 Telephone: (860) 739-0466

**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. The patio shall close one hour after the kitchen closes but no later than 12 midnight.
- b. The setback requirements will be waived to zero as per the site plan.
- c. A sign will be posted that there is "No Sitting on the Wall" outside in the patio area.
- d. Patrons shall not use the patio area for consumption of alcohol unless seated at a table.

Signature of Owner/Applicant: 

**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.

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**Below this line for Office Use Only:**

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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>2615</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