

Town of East Lyme

APPLICATION FOR SPECIAL PERMIT

Date of Application: 3/4/25 Zone: CA Email: zavalamexicanbistro@gmail.com

Applicant's Name: Martin Zavala

Applicant's Address: 135 Boston Post Rd East Lyme Telephone: (860)691-1200

Business Name (if applicable): Zavala's

Location of Affected Premises: 135 Boston Post Rd East Lyme CT Assessor's Map/Block/Lot: 31.1/35

Owner of Record: Village Farm Realty LLC Volume/Page: 0436/0073

Owner's Address: 357 Delano Dr North Kingstown RI 02852 Telephone: (860)961-3555

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: *Jherie M. Coonis* *Martin C Z*
 Signature of Applicant: *Jherie M. Coonis* *Martin C Z*

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 25.3.3-1). 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
Site Plan Attached:	YES	NO	N/A	SITE PLAN FEE
				\$300.00
				STORM WATER
				\$300.00
			STATE FEE:	\$60.00
CHECK #: <u>2518</u>			TOTAL DUE:	\$80.00

Date Approved: _____ Date Denied _____ Publication Date _____ Effective Date: _____

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 Commission Chair