

# Town of East Lyme

## APPLICATION FOR SPECIAL PERMIT

Date of Application: 3/10/25 Zone: CA Email: lymetavern@atlanticbb.net

Applicant's Name: Steve Carpenteri

Applicant's Address: 229 W Main St Niantic Telephone: (860)625-7761

Business Name (if applicable): Lyme Tavern

Location of Affected Premises: 229-2 W Main St Niantic Assessor's Map/Block/Lot: 10.3/1

Owner of Record: Niantic Bay Inn Inc Volume/Page: 0144/0574

Owner's Address: 229 W Main St Niantic CT 06357 Telephone: (860)739-5631

**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. Acoustic Outdoor entertainment only with no amplification
- B. May have speakers of low volume
- C. Last seating at 11:00 p.m., area cleared by midnight
- D. Lighting must be minimal and turned off at close of business
- E. 1 year permit

Signature of Owner: \_\_\_\_\_ 

Signature of 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 25.3.3-1).** 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	
Site Plan Attached:	YES	NO	N/A	SITE PLAN FEE	\$300.00
				STORM WATER	\$300.00
				STATE FEE:	\$60.00
				TOTAL DUE:	\$80.00

CHECK #: 12662

Date Approved: \_\_\_\_\_ Date Denied: \_\_\_\_\_ Publication Date: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Approval subject to conditions below:

1. \_\_\_\_\_
2. \_\_\_\_\_

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