## **Town of East Lyme**

APPLICATION FOR SPECIAL PERMIT
Date of Application: 7/14/25 Zone: SU-E Email: jlokken@eltownhall.com  Applicant's Name: EMT LYMG PMKS AND RECREMON, SERLY LOKKEN, DIRFETOR
Applicant's Name: ENST LYMG PANKS AND RECREMON, SENLY LOKKEN, DIRFETOR
Applicant's Address: 41 SOCIETY RD, NAVIRE Telephone: 860-256-4050
Business Name (if applicable):
Location of Affected Premises: 16 MOSTOWY RD Assessor's Map/Block/Lot: MH 40, LoT5
Owner of Record: OWN OF ERST LYMB Volume/Page: 705/202
Owner's Address: 108 PENNSYL WING AVE Telephone: 860-256-4056
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}:  CONSTANT OF DOG PARK ON PROPERTY
1 111111
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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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 #: \$70TAL DUE: \$
CHECK #:
Date Approved:Date DeniedPublication DateEffective Date:
Approval subject to conditions below:  1
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