

**TOWN OF EAST HARTFORD  
PLANNING & ZONING COMMISSION  
APPLICATION FORM**

Official Receipt Date:

10 16 16

DATE: 10/6

**1. APPLICATION TYPE: (CHECK ALL THAT APPLY)**

**\*COMPLETE SECTION ON PAGE 2 OR 3**

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> SITE PLAN APPLICATION  | <input type="checkbox"/> NATURAL RESOURCES REMOVAL AND FILLING |
| <input type="checkbox"/> SITE PLAN MODIFICATION  | <input type="checkbox"/> SPECIAL USE PERMIT*                   |
| <input type="checkbox"/> FLOOD HAZARD – MAJOR*   | <input type="checkbox"/> ZONING MAP CHANGE*                    |
| <input type="checkbox"/> FLOOD HAZARD – MINOR*   | <input type="checkbox"/> TEXT AMENDMENT*                       |
| <input type="checkbox"/> SOIL EROSION AND SEDIMENTATION - Cumulative disturbed area (sq. ft.): _____ |  |
- |                 |  |                                  |
|-----------------|--|----------------------------------|
| VEHICLE SALES ▶ | <input type="checkbox"/> NEW             | <input type="checkbox"/> USED    |
| REPAIRER ▶      | <input type="checkbox"/> LIMITED         | <input type="checkbox"/> GENERAL |
| FUEL SALES ▶    | <input type="checkbox"/> FILLING STATION |                                  |

**2. SITE AND PROJECT INFORMATION**

PROPERTY ADDRESS: 1250 BURNER AVENUE ZONE: \_\_\_\_\_

ASSESSORS MAP AND LOT: \_\_\_\_\_ PARCEL SIZE (ACRES OR SQ. FT.): \_\_\_\_\_

PROJECT NAME: LODAVARI RESTAURANT / OLD MARCO

PROJECT DESCRIPTION (ATTACH ADDITIONAL SHEETS IF NEEDED):  
SECT-210-2-D APPROVAL OF 3RD SIGN OTHER  
21 Signs A+B have been APPROVED  
ALREADY.

**3. PROPERTY OWNER INFORMATION**

☐ CHECK IF PRIMARY CONTACT

OWNER OF RECORD: Chris Skanbardonis  
OWNER ADDRESS: 297 South Main Street, E. Windsor  
OWNER PHONE: 203-247-9697 OWNER EMAIL: \_\_\_\_\_  
OWNER SIGNATURE: [Signature] PRINT NAME: Chris Skanbardonis

The undersigned owner hereby authorizes: (1) this application, and (2) the Planning and Zoning Commission and Town of East Hartford staff the right to enter upon the property for the purposes of inspection associated with this application.

**4. APPLICANT INFORMATION**

☐ CHECK IF PRIMARY CONTACT

☐ CHECK IF APPLICANT IS SAME AS PROPERTY OWNER  
APPLICANT: HARTFORD SIGN + DESIGN LLC  
APPLICANT ADDRESS: 305 MURPHY RD HARTFORD CT 06114  
APPLICANT PHONE: (860) 293-1824 APPLICANT EMAIL: DARIN@hartfordsigndesign.com  
APPLICANT SIGNATURE: [Signature] PRINT NAME: DARIN

**5. DESIGN PROFESSIONAL INFORMATION**

☐ CHECK IF PRIMARY CONTACT

FIRM: JAMIE PHONE: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ EMAIL: \_\_\_\_\_