



**City of New London**  
*Office of Development & Planning*  
*Planning, Zoning Wetlands Division*  
*City Hall – 2<sup>nd</sup> Floor*  
 181 State Street New London CT 06320  
 (860) 437-6379 Telephone & (860) 437-4467 FAX

**REQUEST FOR A CERTIFICATE OF ZONING COMPLIANCE**

There is a \$50.00 fee (due at the time this request is made) for the Zoning Enforcement Officer to research & prepare a Certificate of Zoning Compliance for you.

**PERSON REQUESTING INFORMATION:**

DATE: \_\_\_\_\_  
 NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
 PLEASE PROVIDE CERTIFICATE OF ZONING COMPLIANCE BY: \_\_\_\_\_

**PROPERTY INFORMATION:**

NAME OF PROPERTY OWNER: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 MAP/BLOCK/LOT: \_\_\_\_\_ ZONE \_\_\_\_\_  
 LOT SIZE: \_\_\_\_\_ SQUARE FEET

EXISTING USE OF PROPERTY : \_\_\_\_\_

PROPOSED USE OF PROPERTY: \_\_\_\_\_

DO YOU KNOW OF ANY ZONING VIOLATIONS AT THIS SITE? \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YES, PLEASE LIST BELOW:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ARE YOU INCLUDING ANY ATTACHMENTS WITH THIS REQUEST FORM? PLEASE LIST:

\_\_\_\_\_  
 \_\_\_\_\_

SIGNED BY \_\_\_\_\_

PLEASE ALLOW A MINIMUM OF ONE WEEK FROM THE DATE THIS REQUEST IS RECEIVED FOR THE ZEO TO PREPARE YOUR DOCUMENT.