

Revised 12/08

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MAY 1 4 2024

TOWN OF WINDSOR PLANNING DEPT

Re-approval
Application for a
Special Use Permit

TOWN PLANNING & ZONING COMMISSION

Name of Applicant	860 502 285/ Phone # WSINGM 2331 (E-mail Address
Name of Applicant 564 PARN AVE BY WILLIAMS C7-06096 Applicant's Address	E-mail Address W
Are you the Owner Optionee Buyer Agent Other	E-mail Address ISING W2331-
If other please explain:	
Owner(s) of record (if other than applicant)	Phone #
Owner's Address	E-mail Address
564 PARK AVE WIMSOR CT-06095 Address of Subject Parcel(s)	
Zone of Subject Parcel(s) Size of Subject Parcel(s) # of Dwelling Units Gross Non-Residential Floor Area	
Applicable Section(s) of the Zoning Regulations: 4.5.7D-Religious Institutions	
Please describe the Special Use and how it will benefit the Town of Windsor:	
eners Religious special incremit	
	5/14/24
Applicant's Signature	Date
Owner's Signature	Date
Office Use Only************************************	*******
Fee \$210 Ck. No. App. rec'd by: Added	Comm. Action/Date: