



RESIDENTIAL ACCESSORY SHED APPLICATION

TOWN OF MONROE
7 FAN HILL ROAD
MONROE, CT 06468
(203) 452 2800
www.monroect.gov

ZCC- _____
Permit Fee: \$110.00

Residential Accessory Shed *(check all that apply):*

NEW REPLACEMENT TO BE BUILT ON SITE PRE-CONSTRUCTED (DROP IN PLACE)
ELECTRIC SERVICE YES NO PLUMBING SERVICE YES NO
DIMENSIONS: _____ (ft long) X _____ (ft wide) X _____ (ft high) Floor Area: _____ (sf)
BASE / FOUNDATION TYPE: _____
PROPOSED SHED USE: _____

Property Identification and Zoning District RF-1 RF-2 RF-3 ARR MFR RR HOD
Historic District: Yes No

Street Address: _____ Assessor Map # _____ Lot #: _____
Record Owner: _____ Email _____ Phone _____
Mailing Address: _____
Applicant (if different): _____ Email _____ Phone _____
Mailing Address: _____

If the location of the shed was subject to a Zoning Board of Appeals Area Variance

ZBA File No. _____ Date Variance Granted _____ Town Clerk Record Page # _____ Volume # _____
Describe Variance _____

PERMIT APPROVAL REVIEW REQUIRED

Department	Date	Signature
<input type="checkbox"/> Tax Collector		
<input type="checkbox"/> Monroe Health Department		
<input type="checkbox"/> Inland Wetlands		
<input type="checkbox"/> Zoning Enforcement Officer		

Applicant / Owner Certification

I hereby certify that I am making this application on behalf of and with the full authority of the owner(s) of the property or premises and am aware of and understand the Zoning and/or Subdivision Regulations pertinent to the application and affirm that the statements and information provided are accurate and true. Falsification, by misrepresentation or omission, or failure to comply with any conditions of issuance shall constitute a violation of the Monroe Zoning Regulations, and make the certificate subject to revocation or suspension. Further, the undersigned hereby authorizes the Town of Monroe and its agents, to access the premises during normal and reasonable business hours for the purpose of application investigation, inspection of improvements or construction, and enforcement of the Zoning and/or Subdivision Regulations, Town Ordinances, or General Statutes of the State of Connecticut, as may be applicable.

I understand that any issued Provisional Certificate of Zoning Compliance will be based upon the application documents submitted. The Permanent Certificate of Zoning Compliance will be issued based upon determination to the satisfaction of the Zoning Enforcement Officer that completed work complies with the standards of the Monroe Zoning Regulations.

Owner: _____
Print Name *Signature* *Date*

Applicant: _____
Print Name *Signature* *Date*

NOTE:

- **Provisional Certificate is Void One (1) Year from Date of Issuance**
- **Permit Fees are NOT refundable or transferable after Issuance of any Certificate**
- **Plot Plan REQUIRED**