



City of Middletown Department of Land Use

245 deKoven Drive
Middletown, CT 06457
(860)638-4590
www.MiddletownCT.gov

NOTICE OF APPEAL

NOTICE OF APPEAL FROM AN ORDER, REQUIREMENT OR DECISION OF OFFICIAL CHARGED WITH ENFORCEMENT OF CITY OF MIDDLETOWN ZONING REGULATIONS

Location Information

Affected Property Address: _____

Map: _____ Lot: _____ Parcel ID: _____ Zone: _____ Lot Area: _____

Appellant Information

Name: _____ Firm Name: _____

Street Address: _____ City: _____ ST: _____ Zip: _____

Email: _____ Phone: _____

Signature*: _____ Date: _____

Property Owner(s) Information

Same as Appellant:

Name: _____ Principal: _____

Street Address: _____ City: _____ ST: _____ Zip: _____

Official whose action is being appealed: _____

Application #: _____

Date of decision: _____

Has any previous appeal been filed from this action? Yes No

If so, when and who filed the previous appeal? _____

Specify code or regulation on which this appeal is based: _____

State grounds for the appeal: _____

If more space is needed, then please provide separate narrative document.

* This form shall not be accepted unless signed by the party making the appeal, all required information is provided, and all required items are attached.

To be completed by Land Use Staff only:

Fee Paid \$ _____ Check # _____

Received by: _____

Application # _____

Submission Checklist

- One (1) original completed notice of appeal form with original applicant and owner signatures.
- One (1) copy of the order, requirement or decision being appealed.
- One (1) copy of the legal description of each property affected by such order, requirement or decision. e.g. Deed.
- One (1) copy of additional sheets, if necessary.
- One (1) copy of list of abutting property owners (names and addresses).
- \$200 per appeal plus \$60 State Fee (Payable by cash or check made out to The City of Middletown.)

The undersigned hereby represents that all the above statements and the statements contained in any items attached or submitted herewith are true to the best of their knowledge and belief.

Signature of Person Appealing

Date