

**CHESHIRE PLANNING AND ZONING COMMISSION
REQUEST FOR INCLUSION IN PUBLIC NOTICE REGISTRY
PURSUANT TO PUBLIC ACT 06-80
CONCERNING ANY CHANGE IN CHESHIRE ZONING REGULATIONS OR
BOUNDARIES, SUBDIVISION REGULATIONS, OR PLAN OF CONSERVATION AND
DEVELOPMENT
INITIATED BY THE CHESHIRE PLANNING AND ZONING COMMISSION**

Name/Non-profit Organization: _____

Address: _____

Mailing Address (if different from above) _____

E-mail Address (if applicable): _____

Requestor is: (check all which apply):

- Landowner in the Town of Cheshire: _____
- Elector in the Town of Cheshire: _____
- Non-Profit Organization: _____

Notices of Planning and Zoning Commission meetings to be sent by: (check one)

- Regular Mail: _____
- E-mail: _____

Signed: _____

Printed Name: _____ Date: _____

e-mail completed form to: wvoelker@cheshirect.org and cc jpatignelli@cheshirect.org
or Mail to: Town of Cheshire, Planning Department, 84 South Main Street, Cheshire, CT 06410.

Your Name will be kept on the registry for a period of three (3) years, after which time you must submit a new request to be added for another three year period.