

### TOWN OF SALISBURY

PLANNING AND ZONING COMMISSION

Number 2025-0279

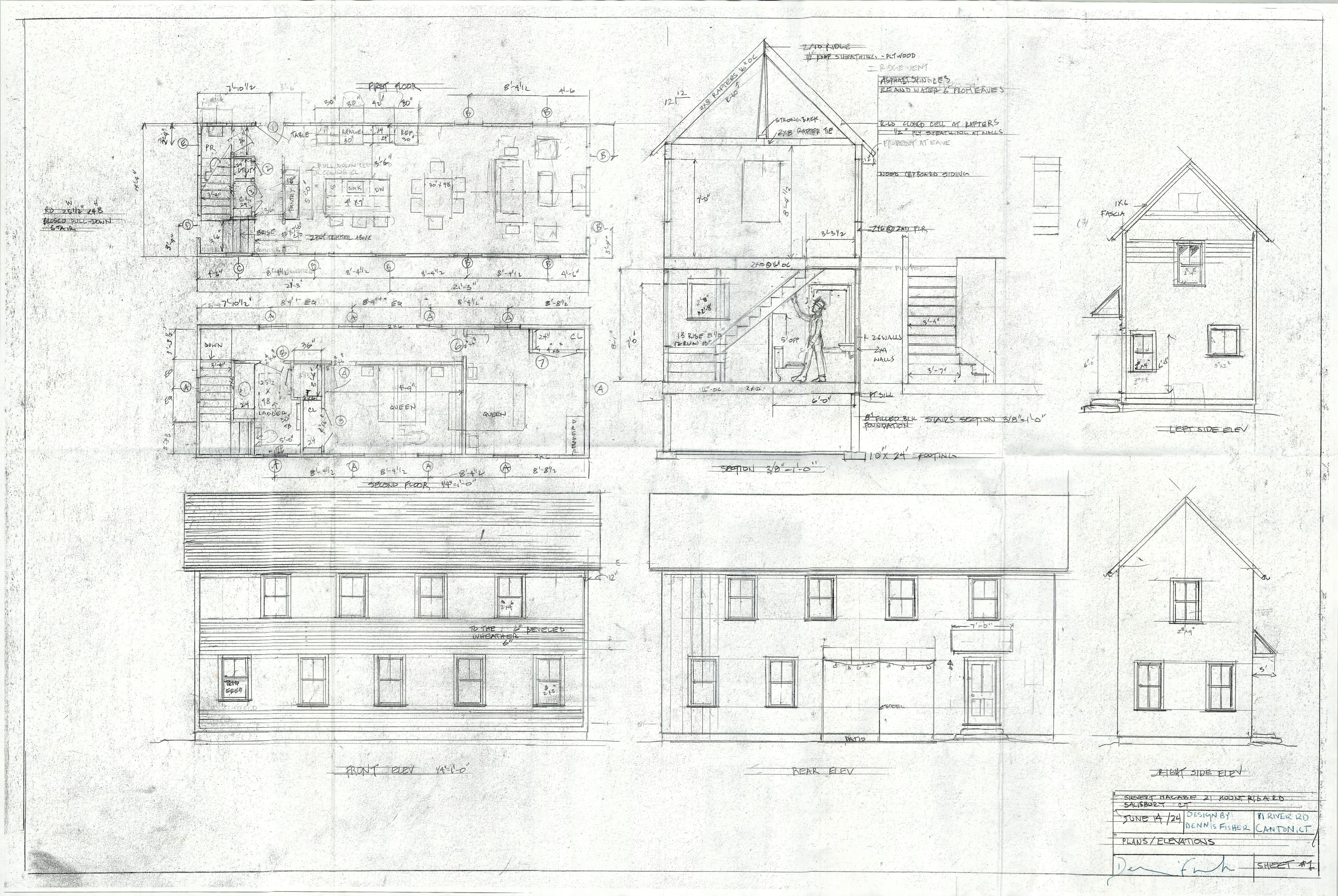
(860) 435-5190

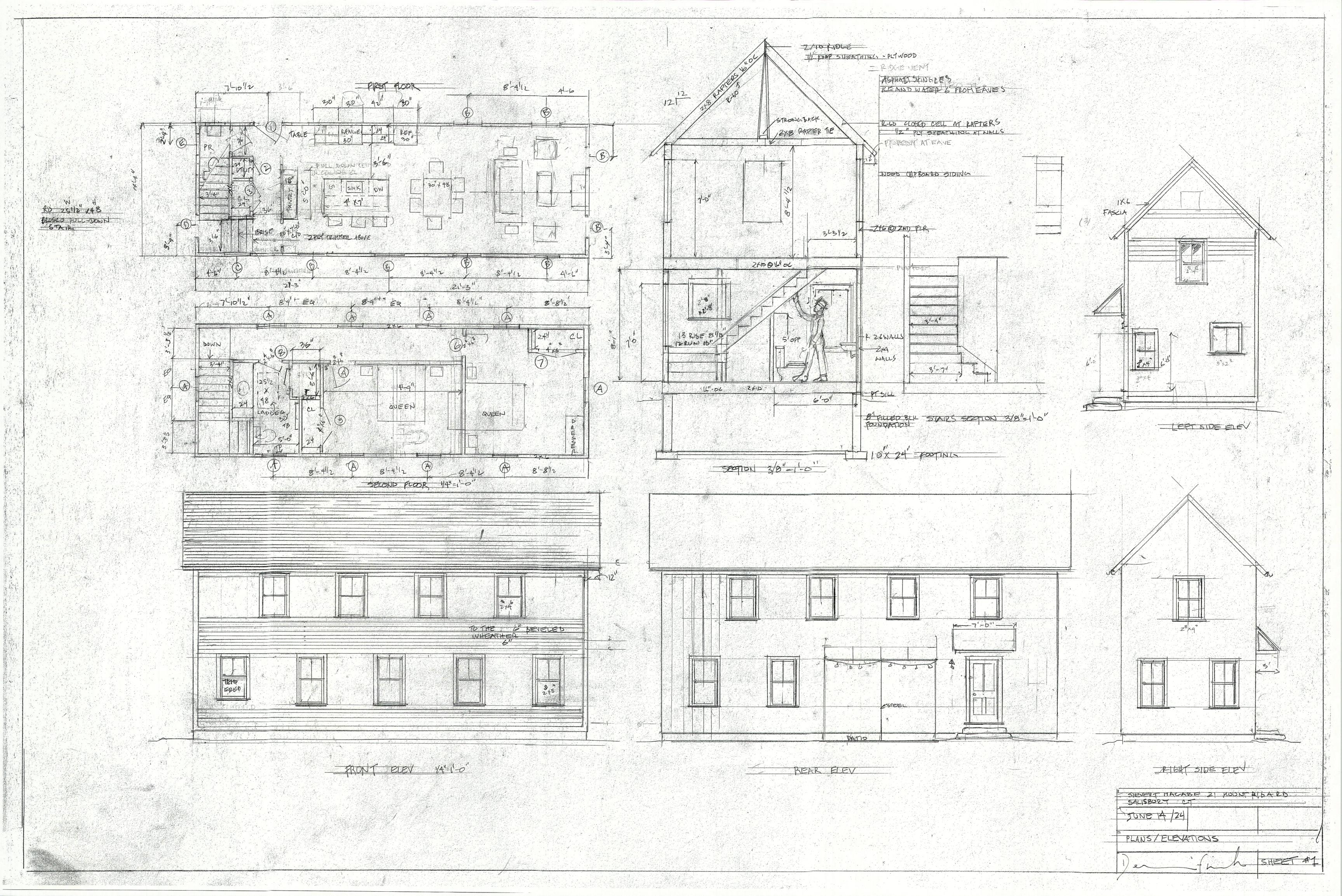
FAX: (860) 435-5172

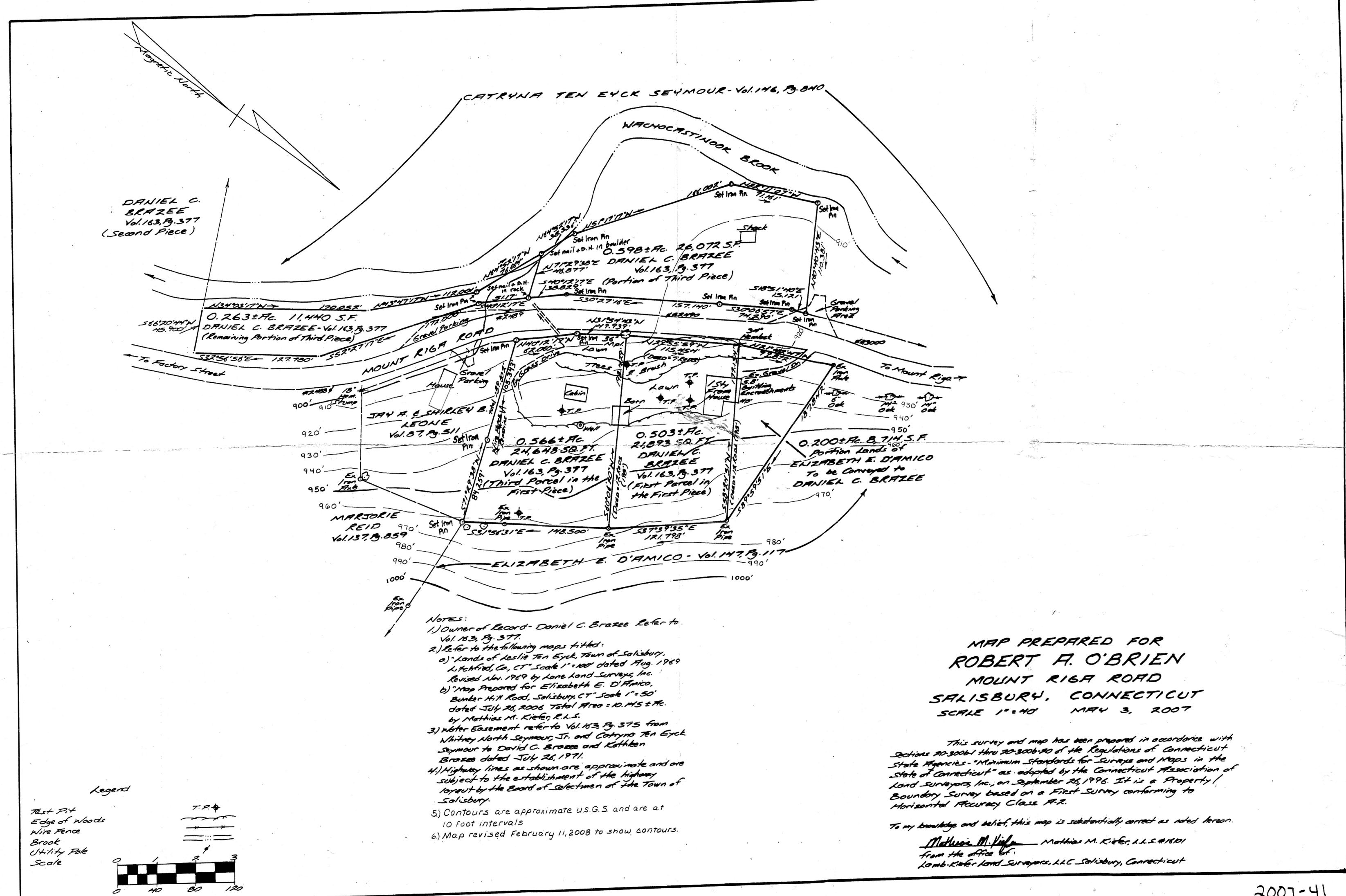
#### APPLICATION FOR SPECIAL PERMIT

	Owner of Record: Sievert & Eliza McCabe						
	Address of Owner: 511 Line Rock Rd Lakeville CT D6037						
	Property Location: Tax Map # 14 Lot# 17 Land Records: Vol. 2 72 Page 507						
Property Address: 21 Mt. Riga Rd Salisbury, ct 06068							
	Acreage: 45 Zone:						
	Bounded generally on the North by: Barbara Barvoets						
	(Full name of owner of record. East by: Reid Michael & Samuel & James Tr.						
	Attach addition pages if needed) South by: 5 Riggs   2   C						
	West by: Barbara Barrocts						
	Special Permit Use Requested: <u>vertical</u> addition. Howe would arm 49 Section of the Salisbury Zoning Regulations.						
	Written statement of Proposed Use (4 copies): See attached						
	Site Plan - 4 copies (See attached sheet)						
	Soil Frosion and Sediment Control Plan:						
	Approval from TAHD, WPCA, or BHC regarding sewer and water: see attached						
Historic District Commission, if applicable:							
	Conservation District Commission, if applicable:						
	Preliminary Architectural Plans for Proposed structures & signs (2 copies)						
	Estimated Site Improvement Costs (other than buildings):						
	Estimated Site Improvement Costs (other than buildings): no cost, performed by owner Written Assurance of Bond or Letter of Credit: no martgage.						
	Additional Remarks:						
	Additional Remarks.						
	Owner's Signature: Date: 3/13						
	Applicant's Signature and Title:						
	Applicant's Address and phone number:						
	Filed at the Planning and Zoning Commission Office this 13 day of March 2025						
	A second						
	Fee Paid: #360 \$1931 Received By: AW						
- 1	Title: Lux						
	DEDIN						
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NOTE: One copy of the written statement of proposed use SHALL be sent to all abutting landowners by certified mail. This is the responsibility of the owner/applicant. The signed return receipts shall be submitted with this application.









# TORRINGTON AREA HEALTH DISTRICT

350 Main Street ♦ Suite A ♦ Torrington, Connecticut 06790

Phone (860) 489-0436 ♦ Fax (860) 496-8243 ♦ E-mail <u>info@tahd.org</u> ♦ Web <u>www.tahd.org</u>

# "Promoting Health & Preventing Disease Since 1967" Addition / Accessory Structure Application

## This is not a building permit. You must obtain a permit from the Building Inspector prior to any construction.

·							
Sievert & Eliza Mccabe	21	Mount Riga Rd		Salisbury			
Owner	Street #	Street Name		Town			
511 Lime Rock Rd	Lakeville	CT	06039	86	0-480-8376		
Mailing Address	Town	ST	Zip	Owi	ner Telephone		
elizad.mccabe@gmail.com		845-235-6044		0.45 AC.			
Email Addres	S	Cell Phone		Lot Size			
Eliza Mc Cable							
Dimensions of Addition	In	Information Supplied By			Septic System Designed By		
Add one additional bedroom to the second story for a total of 2 bedrooms on the second floor  Description of Addition							
WELL AND SANITARY SEWER: \$35.00 CODE COMPLIANCE STUDY (B100a): \$150.00 (Returned Check Fee on any item: \$25.00)  Application must be accompanied by a SKETCH (on back) showing the relative distances from the proposed addition/structure to the well and septic system. Sketch must be signed by applicant.  Signature of Applicant:  Signature on File Application Date: 2-11-25  TAHD USE ONLY BELOW LINE							
	conditions	of approval		DE	NIED		
conditions of approval  Existing Records? Septic Permit Number: 17770							
☐ B100a study required ☐ field investigation							
A new well is being drilled as part of this approval. The current well is within 75' of the septic system. A new septic tank and D-Box are to be installed as part of this approval. The septic system was evaluated and comewhat deteriorated. The soils are such that would allow for a new system to be installed in the event of a septic failure although a stream and property lines will limit the location, ANY FUTURE addition proposals VILL require a complete B100a plan prepared by a CT licensed engineer and approved by T.A.H.D.							
Sanitarian: Catherine Web	per		Decis	ion Date:	2/18/2025		

TAHD is an equal opportunity provider and Employer

