TOWN OF EAST HARTFORD

DEPARTMENT OF DEVELOPMENT 740 Main Street, 2nd Floor East Hartford, Connecticut 06108 Phone: 860-291-7300

DIGITAL DATA AFFIDAVIT FORM

Accompanying this form shall be four (4) prints and one (1) digital copy of the Planning and Zoning Commission approved plans submitted pursuant to the requirements of Section 705.2.c of the Zoning Regulations.

DATE:	PLANS SUBMITTED BY (NAME & CONTACT):			
PROJECT NAME:				
PROJECT ADDRESS:				
PLANNING AND ZONING COMMISSION APPROVAL DATE:				
APPLICATION TYPE:	□SPECIAL PERMIT □SITE PLAN □SITE PLAN MODIFICATION □SITE LOCATION			
(CHECK ALL THAT APPLY)	□FLOOD HAZARD MAJOR □FLOOD HAZARD MINOR □SOIL E&S CONTROL PLAN □OTHER (SPECIFY)			
PLAN CONTENTS:				
PLAN TITLE:				
NO. OF SHEETS:	FINAL REVISION DATE:			
OTHER DOCUMENTS:				
DESIGN PROFESSION	IALS: SIGNATURES & STAMPS*			
DESIGN FIRM 1.	PRINT NAME SIGNATURE SEAL			
	SEAL			

^{*}By signing and stamping this affidavit, and in accordance with Section 20-300-10 of the Regulations of Connecticut State Agencies, I attest that the digital content accompanying this form has been reviewed and is in compliance with Section 705.2.c of the Zoning Regulations, and I have direct knowledge of the information contained within.

DESIGN PROFESSIONALS: SIGNATURES & STAMPS*

DESIGN FIRM	PRINT NAME	<u>SIGNATURE</u>	A A A A A A A A A A A A A A A A A A A
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