

Use- ADMIN-2021-2345  
Sign- ADMIN-2021-2346  
Historic (Sign)-<sup>COMM</sup>ADMIN-2021-0478  
EnerGov App.#: \_\_\_\_\_



**City of Hartford  
Department of Development Services  
Planning Division**

260, Constitution Plaza, Hartford, Connecticut 06103-1822  
Return Form to the Planning Desk Counter or Via Email  
860-757-9040 | [oneplan@hartford.gov](mailto:oneplan@hartford.gov)

# PLANNING AND ZONING APPLICATION

PLEASE CHECK THE ACTION(S) YOU ARE APPLYING FOR:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Zoning Appeal  | <input type="checkbox"/> Approval of Location | <input checked="" type="checkbox"/> Historic Review |
| <input checked="" type="checkbox"/> Zoning Permit:<br><u>Signage/ Use/Accessory</u> | <input type="checkbox"/> Zoning Variance      | <input type="checkbox"/> Lot Combination            |
| <input type="checkbox"/> Site Plan  |   | <input type="checkbox"/> Liquor Permit              |
| <input type="checkbox"/> Subdivision/Lot Line Revision                              | <input type="checkbox"/> Zoning Map Change    | <input type="checkbox"/> Special Permit             |

Receiving Federal Funds:

- Yes  No  
 Demo  Add.  Repair

Recent photos are required for all Historic Apps

## 1. PROPERTY INFORMATION

Property Address: 425 MAIN ST City: Hartford State: CT Zip Code: 06103  
Parcel ID: 247-454-199 Zoning District: (<http://assessor1.hartford.gov/default.asp>) DT-3  
Property Owner: SARJAL PARTNERS, LLC  
Property Owner's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## 2. APPLICANT

Please check if "Applicant" is the same as "Property Owner"

Name of Applicant: MARVIN & TANISHA SIMPSON File Date: \_\_\_\_\_  
Address: 168 BROWN ST City: HARTFORD State: CT Zip Code: 06114  
Phone: 347-636-7587 Email: ISLANDTASTESRESTAURANT@GMAIL.COM

## 3. PRIMARY POINT OF CONTACT:

Name: MARK MULLINEY C/O GLOBALTECH DESIGN, LLC  
Phone: 860-242-8782  
Email: GLOBALTECHDESIGNLLC@YAHOO.COM

**4. PROJECT NARRATIVE**

Describe your application action(s) and provide as much detail as possible. Attach additional pages if necessary:

I am planning on opening a bar & Grill @ 425  
Main Street, Hartford. I am seeking permission to  
do construction in the building.

**\*\* PLEASE COMPLETE THE FOLLOWING SECTIONS AS THEY PERTAIN TO THE ACTIONS YOU ARE APPLYING FOR.  
DON'T FORGET TO SIGN THE APPLICATION ON THE LAST PAGE!**

**A. COMPLETE IF APPLYING FOR ZONING MAP CHANGE:**

Proposed Zone: \_\_\_\_\_

Describe the existing use of land and buildings in the zone change area:

\_\_\_\_\_  
\_\_\_\_\_

Describe the proposed use of land and buildings in the zone change area:

\_\_\_\_\_  
\_\_\_\_\_

Reason for this request: \_\_\_\_\_

**B. COMPLETE IF APPLYING FOR ZONING APPEAL:**

Are you an aggrieved party? (Check one):  Yes  No

Permit or Violation number: \_\_\_\_\_

State your reason for appealing the decision of the zoning administrator or zoning enforcement officer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. COMPLETE IF APPLYING FOR ZONING VARIANCE:**

State the particular hardship\* or unnecessary difficulty that prompts this application and cite the section of the zoning regulations that you are seeking relief from. (Continue this narrative on a separate sheet if necessary.)

N/A

*\*A "hardship" is defined by the Connecticut State Statutes Section 8-6 where by "with respect to a parcel of land where, owing to conditions especially affecting such parcel but not affecting generally the district in which it is situated, a literal enforcement of such by laws, ordinances or regulations would result in exceptional difficulty or unusual hardship." Note that "mere financial loss does not constitute hardship warranting granting of variance [unless] loss is so great as to amount to confiscation of applicant's property; [a] variance might be justified."*

**D. COMPLETE IF APPLYING FOR SUBDIVISION, LOT LINE REVISION, OR LOT COMBINATION**

**Lot Subdivision/Lot Line Revision:**

Number of new lots to be created: 3 Area of each of the new lots in square feet \_\_\_\_\_

Street frontage of each of the new lots in feet \_\_\_\_\_

**Lot Combination:**

Address of lots to be combined \_\_\_\_\_

Map/Block/Lot for each property to be combined: Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

(Map/Block/Lot and address information can be found at <http://gis.hartford.gov/parcelviewer/index.html>)

**E. COMPLETE IF APPLYING FOR HISTORIC REVIEW**

**IMPORTANT: HISTORIC COMMISSION APPROVAL MUST FIRST BE OBTAINED BEFORE ANY BUILDING OR DEMOLITION PERMIT WILL BE ISSUED FOR WORK ON HISTORIC PROPERTIES. AFTER HISTORIC APPROVAL APPLICANTS MAY STILL NEED ZONING REVIEW. NO WORK MAY BEGIN UNTIL A BUILDING PERMIT IS ISSUED**

**\*\*Recent photos AND proposed specifications/cut sheets for material are required to be submitted with this application.**

Proposed work includes:  Repairs  Addition  New construction  Demolition  Other (specify)

If proposing demolition, provide reason (attach additional pages if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current materials being repaired/ replaced:

\_\_\_\_\_

Materials products being used in work: \_\_\_\_\_

**F. COMPLETE IF APPLYING FOR A SIGN PERMIT**

1. Is this sign proposed outside of the Building line?  Yes  No  
Maximum extension from the Building line: \_\_\_\_\_ ft. \_\_\_\_\_ in.

2. Is this sign proposed outside of the Street line?  Yes  No  
Maximum extension from the Street line: \_\_\_\_\_ ft. \_\_\_\_\_ in.

3. Is this sign illuminated?  Yes  No

4. Engineer Name(if any): \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

5. Minimum distance from lowest point of sign to sidewalk: \_\_\_\_\_ ft. \_\_\_\_\_ in.

6. Maximum height of sign from lowest established grade: \_\_\_\_\_ ft. \_\_\_\_\_ in.

7. Distance from the nearest outdoor sign: \_\_\_\_\_ ft. \_\_\_\_\_ in.

8. Square feet of surface for one face of the sign: \_\_\_\_\_ ft. \_\_\_\_\_ in.

9. Wording on the sign(include all words): ISLAND TASTE SPORTS BAKE & GALL

Description of work (attach additional pages if necessary):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** Please submit copies of all drawings drawn to scale. Signed drawings should include the dimension of the sign. Elevation of building should include the location of proposed and existing signs. Site plans should include the location of proposed and existing signs and their distance from Building lines and Property lines.

**5. SIGNATURE(S)**

*By signing below, I certify that all work will be done in strict accordance with the LOCAL, STATE AND FEDERAL BUILDING CODES. Further, all work covered by this application has been authorized by the owner of this property.*

*I agree that no work shall commence until all determinations have been made and the proper permits have been obtained.*

Applicant Signature: Simpson

Date: 8/23/21

Printed Name of Applicant: Tanisha Simpson

Property Owner Signature (REQUIRED): [Signature]

Date: 8/23/21

Printed Name of Property Owner: Savage Partners LLC

