



COMMENT FORM

Name:

Phone:

Email Address:

Regulation to which comment applies: (Check one)

- | | |
|---|---|
| <input type="checkbox"/> Draft Zoning Map | <input type="checkbox"/> Draft Wetlands Regulation |
| <input type="checkbox"/> Draft Zoning Regulation | <input type="checkbox"/> Draft Engineering Standards |
| <input type="checkbox"/> Draft Subdivision Regulation | <input type="checkbox"/> General Comment (<i>Not specific to any Draft</i>) |

Section Number(s):

Page Number(s):

Comments:

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