Town of Wallingford, Connecticut

APPLICATION NO.: 506-26 **FEE: $550.00**

APPLICATION FOR ZONING REGULATION CHANGE

NAME OF APPLICANT: Justin Fritz DATE: 7/20/26

MAILING ADDRESS: 212 Half mile Rd PHONE: 203 624 2024
North Haven CT 06473

E-MAIL ADDRESS: Justin@thewhitecoakbridge.com

Section to be removed: 6.34 - Omit the word transporter

Proposed new section: See Attached -

(Attach additional sheet if necessary)

Applicant's Signature

Company Name (If applicable)

For Official Use Only:

Date Application Submitted:

Filing Fee Paid:

3/22